

FOR OFFICIAL USE



|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|

National  
Qualifications

Mark

|  |
|--|
|  |
|--|

**X836/76/01**

**Health and Food Technology  
Answer Booklet**



Fill in these boxes and read what is printed below.

Full name of centre

|  |
|--|
|  |
|--|

Town

|  |
|--|
|  |
|--|

Forename(s)

|  |
|--|
|  |
|--|

Surname

|  |
|--|
|  |
|--|

Number of seat

|  |
|--|
|  |
|--|

Date of birth

Day

|  |  |
|--|--|
|  |  |
|--|--|

Month

|  |  |
|--|--|
|  |  |
|--|--|

Year

|  |  |
|--|--|
|  |  |
|--|--|

Scottish candidate number

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

Write your answers clearly in this answer booklet. You must clearly identify in the margin the question number you are attempting.

Use **blue** or **black** ink.

Before leaving the examination room you must give this booklet to the Invigilator; if you do not you may lose all the marks for this paper.

ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |



| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |





| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |



ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |



| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |









| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |





ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |



| ENTER<br>NUMBER<br>OF<br>QUESTION | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--------------------------------------|
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |





| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |



ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |





| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |







| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |



ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

| ENTER NUMBER OF QUESTION |  | DO NOT WRITE IN THIS MARGIN |
|--------------------------|--|-----------------------------|
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |
|                          |  |                             |





| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |









ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |



| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |



ENTER  
NUMBER  
OF  
QUESTION

DO NOT  
WRITE IN  
THIS  
MARGIN

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |



| ENTER<br>NUMBER<br>OF<br>QUESTION |  | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--|--------------------------------------|
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |
|                                   |  |                                      |





| ENTER<br>NUMBER<br>OF<br>QUESTION | DO NOT<br>WRITE IN<br>THIS<br>MARGIN |
|-----------------------------------|--------------------------------------|
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |
|                                   |                                      |





| For marker's use |       |
|------------------|-------|
| Question         | Marks |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |
|                  |       |

