

FOR OFFICIAL USE



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National Qualifications

Mark

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X819/77/01

**Design and Manufacture
Answer booklet**



* X 8 1 9 7 7 0 1 *

Fill in these boxes and read what is printed below.

Full name of centre

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Town

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Forename(s)

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Surname

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Number of seat

--

Date of birth

Day

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Month

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Year

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Scottish candidate number

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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.



* X 8 1 9 7 7 0 1 0 1 *

ENTER
NUMBER
OF
QUESTION

DO NOT
WRITE IN
THIS
MARGIN



* X 8 1 9 7 7 0 1 0 2 *

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* X 8 1 9 7 7 0 1 0 3 *

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