

PAPER D

JUNIOR

Candidate Name Shavkatov Shitabar

Country Uzbekistan, Sam

Candidate No. C A N 5 6 7 3 1 2 4 5 1 9

Level D

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

9						
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Question 22

1	1	1				
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Question 23

6	0					
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Question 24

O						
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Question 25

6	2					
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INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER C

UPPER PRIMARY

Candidate Name Aminjon Namasamiyev

Candidate No.

C	A	N	1	8	3	4	1	2	4	4	0	0
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Country Uzbekistan

Level C

Candidate Answer Sheet

Multiple Choice

Free Response

1	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
2	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
3	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
4	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
5	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
6	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
7	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
8	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
9	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
10	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
11	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
12	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
13	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
14	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
15	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
16	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
17	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
18	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
19	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
20	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

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PAPER C

UPPER PRIMARY

Candidate Name Bear Yeldache

Country Uzbekistan

Candidate No. C A N F 2 8 9 1 2 4 3 1 3

Level C

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

7						
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Question 22

15						
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Question 23

45						
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Question 24

20						
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Question 25

25						
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INSTRUCTIONS

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Questions 1 to 20

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Questions 21 to 25

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PAPER B

MIDDLE PRIMARY

Candidate Name Davronbek Bahriiddinov

Country UZB

Candidate No. C A N 8 3 2 9 1 2 4 2 2 2

Level B

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

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Question 22

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Question 23

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Question 24

10	101						
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Question 25

19							
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INSTRUCTIONS

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Questions 1 to 20

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Questions 21 to 25

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PAPER B

MIDDLE PRIMARY

Candidate Name Diyora Bastijorosa

Country Uzbekistan, Samarkand

Candidate No. C A N G 8 6 6 1 2 4 2 2 4

Level B

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

6						
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Question 22

9						
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Question 23

10						
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Question 24

123						
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Question 25

8						
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INSTRUCTIONS

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Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

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Questions 21 to 25

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PAPER C

UPPER PRIMARY

Candidate Name

Karimboyev Elchinbek

Country

Uzbekistan
Uzbek

Candidate No.

C	A	N	6	1	3	5	1	2	4	3	1	2
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Level

C

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

6

Question 22

12

Question 23

32 CM²

Question 24

12

Question 25

35

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

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PAPER C

UPPER PRIMARY

Candidate Name Ermakov Elvur Sarvarovich Country VIB Samarkand

Candidate No. C A N 7 5 6 7 1 2 4 4 0 1 Level C

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

7 _____

Question 22

13 _____

Question 23

42 _____

Question 24

16 _____

Question 25

45 _____

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

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PAPER B

MIDDLE PRIMARY

Candidate Name Em. I Abutalipov

Candidate No.

C	A	N	S	5	8	6	1	2	4	1	0	4
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Country Uzbekistan

Level B

Candidate Answer Sheet

Multiple Choice

Free Response

1	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
2	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
3	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
4	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
5	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
6	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
7	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
8	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
9	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
10	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
11	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
12	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
13	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
14	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
15	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
16	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
17	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
18	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
19	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
20	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Question 21

4						
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Question 22

3						
---	--	--	--	--	--	--

Question 23

3						
---	--	--	--	--	--	--

Question 24

10						
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Question 25

10						
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Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

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PAPER A

LOWER PRIMARY

Candidate Name Imomiddin Abdukhnikov

Country Samarkand
Uzbekistan

Candidate No. C A N G 8 3 9 1 2 3 9 4 5

Level A.

Candidate Answer Sheet

Multiple Choice

1	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
2	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
3	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
4	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
5	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
6	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
7	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
8	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
9	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
10	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
11	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
12	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
13	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
14	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
15	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
16	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
17	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
18	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
19	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
20	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E

Free Response

Question 21

29adam

Question 22

5:00,0agt

Question 23

121keycr

Question 24

580ladid

Question 25

O = 19

INSTRUCTIONS

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Questions 1 to 20

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Questions 21 to 25

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PAPER B

MIDDLE PRIMARY

Candidate Name

Imronbek Alokiddinov

Country

Uzbekistan

Candidate No.

C A N 7 6 4 0 1 2 4 1 0 7

Level

B

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

3

Question 22

5

Question 23

9

Question 24

11

Question 25

8

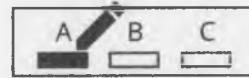
INSTRUCTIONS

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PAPER A

LOWER PRIMARY

Candidate Name Ismoil Maxmayusupov

Samarkand
Country Uzbekistan

Candidate No. C A N 6 4 1 2 1 2 3 8 0 4

Level 1st

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

27 8 40 6 02

Question 22

4 : 40

Question 23

100121

Question 24

37 8 39 27. k

Question 25

0 1 2 3 4 5 6 7 8 9

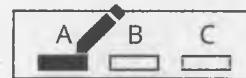
INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER C

UPPER PRIMARY

Candidate Name Toshturdiyeva Jahona

Country Uzbekistan

Candidate No. C A N F 4 0 7 1 2 4 3 0 9

Level C

Candidate Answer Sheet

Multiple Choice

1	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
2	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
3	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
4	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
5	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
6	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
7	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
8	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
9	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
10	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
11	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
12	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
13	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
14	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
15	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
16	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
17	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
18	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
19	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
20	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E

Free Response

Question 21

3,75 _____

Question 22

30 _____

Question 23

Question 24

Question 25

50 - bad _____

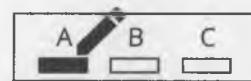
INSTRUCTIONS

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Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

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Do not write inside this box. For examiner use only.

PAPER C

UPPER PRIMARY

Candidate Name XASAN NORBOYEV Country UZB.SAMORKAND

Candidate No. C A N 8 4 2 3 1 2 4 3 1 0

Level C

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

O L T i

Question 22

Question 23

Question 24

Question 25

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

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Rub out COMPLETELY any answer you wish to change with an eraser.

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PAPER A

LOWER PRIMARY

Candidate Name Boligul Xondonir

Samarkand

Uzbekistan

Candidate No. C A N 1 5 7 5 1 2 3 9 4 4

Country

Level

A

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

2 + a = 6 + 2

Question 22

2 + 4 = 3 + 5

Question 23

3 + 12 = 10 + 2

Question 24

3 + 12 = 10 + 2

Question 25

3 + 12 = 10 + 2 = 18. 12 = 16

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER D

JUNIOR

Candidate Name

Ibragimov Tushin

Country

Uzb, Samarkand

Candidate No.

C A N 3 2 9 5 1 2 4 5

Level

D

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

1

Question 22

2 6 5 0 0

Question 23

6 0 0

Question 24

2 0 2 5

Question 25

4 0

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER C

UPPER PRIMARY

Candidate Name Nurbayev Yuxan

Country U.Z. B.s.a.

Candidate No. C A N 1 4 3 8 1 2 4 3 1 1

Level C

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

8 7 y e t t i

Question 22

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Question 23

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Question 24

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Question 25

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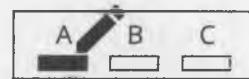
INSTRUCTIONS

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Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

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Do not write inside this box. For examiner use only.

PAPER B

MIDDLE PRIMARY

Candidate Name Sobirov Xushnubek

Candidate No. C A N 8 2 2 6 1 2 4 1 0 5

Country Uzbekistan, Samarkand

Level B

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

4						
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Question 22

7						
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Question 23

22						
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Question 24

1521						
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Question 25

9						
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INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

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Do not write inside this box. For examiner use only.

PAPER D

JUNIOR

Candidate Name Mansur Shirinboyev

Country UZB Samarkand

Candidate No. C A N 4 1 6 6 1 2 4 4 7 0

Level D

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

5					
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Question 22

10	1	0	3	2	m	
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Question 23

20						
----	--	--	--	--	--	--

Question 24

2650					
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Question 25

70						
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INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

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Rub out COMPLETELY any answer you wish to change with an eraser.

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Do not write inside this box. For examiner use only.

PAPER B

MIDDLE PRIMARY

Candidate Name Sharafbayev Mohammadali

Candidate No. C A N 3 8 1 2 1 2 4 2 2 0

Country Uzbekistan

Level B

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

8

Question 22

46

Question 23

28

Question 24

1001

Question 25

19

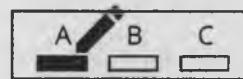
INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

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PAPER B

MIDDLE PRIMARY

Candidate Name Sutfillayer Muhammadsaljon

Candidate No.

C	A	N	8	6	7	4	1	2	4	2	2	3
---	---	---	---	---	---	---	---	---	---	---	---	---

Country Uzbekistan,
Samarkand
Level B

Candidate Answer Sheet

Multiple Choice

1	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
2	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
3	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
4	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
5	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
6	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
7	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
8	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
9	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
10	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
11	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
12	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
13	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
14	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
15	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
16	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
17	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
18	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
19	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
20	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E

Free Response

Question 21

4						
---	--	--	--	--	--	--

Question 22

2	2					
---	---	--	--	--	--	--

Question 23

4	8	0				
---	---	---	--	--	--	--

Question 24

4	5	0	b			
---	---	---	---	--	--	--

Question 25

6	4					
---	---	--	--	--	--	--

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

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PAPER B

MIDDLE PRIMARY

Candidate Name Masande Nurbek

Country Uzb, Samarkand

Candidate No. CAN 6968124106

Level B

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

8							
---	--	--	--	--	--	--	--

Question 22

(a - 3)							
---------	--	--	--	--	--	--	--

Question 23

9	6						
---	---	--	--	--	--	--	--

Question 24

5	8	9					
---	---	---	--	--	--	--	--

Question 25

1	6						
---	---	--	--	--	--	--	--

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

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PAPER C

UPPER PRIMARY

Candidate Name Ulmayjonov Ogabel

Country Uzbekistan

Candidate No. C A N 8 1 8 1 1 2 4 3 1 5

Level C

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

5 _____

Question 22

10 _____

Question 23

20 0 _____

Question 24

16 _____

Question 25

18 _____

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

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Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER D

JUNIOR

Candidate Name

Nodirash, Iov Oybek

Country

Uzbekistan

Candidate No.

C A N 5 0 2 5 1 2 4 4 6 9

Level

D

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

1

Question 22

5 5 M E T E R S

Question 23

Question 24

4 1 0

Question 25

3 0

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER C

UPPER PRIMARY

Candidate Name Solomonbek Subaymonov

Country Uzbekistan

Candidate No. C A N 1 8 9 9 1 2 4 3 1 4

Level C

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

6 p i p e s

Question 22

13

Question 23

36 cm 15 cm

Question 24

18

Question 25

85

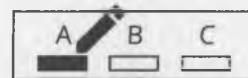
INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER B

MIDDLE PRIMARY

Candidate Name Abduwarakov Samihah

Country Pakistan

Candidate No. C A N 3 8 5 6 1 2 4 2 2 1

Level B

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

8

Question 22

4

Question 23

1 1 6

Question 24

7 9 6 0

Question 25

2 3

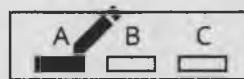
INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER A

LOWER PRIMARY

Candidate Name

Sayosaliev Javroffjon

Country

Uzbekistan

Candidate No.

C	A	N	8	1	8	6	1	2	3	9	4	3
---	---	---	---	---	---	---	---	---	---	---	---	---

Level

A

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

--	--	--	--	--	--	--	--

Question 22

--	--	--	--	--	--	--	--

Question 23

--	--	--	--	--	--	--	--

Question 24

2	8						
---	---	--	--	--	--	--	--

Question 25

3	8						
---	---	--	--	--	--	--	--

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER D

JUNIOR

Candidate Name Shohjahon Ortigov

Country UZB, Samarkand

Candidate No. C A N 1 5 7 8 1 2 4 5 1 8

Level D

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

g						
---	--	--	--	--	--	--

Question 22

1	1	3				
---	---	---	--	--	--	--

Question 23

6	0					
---	---	--	--	--	--	--

Question 24

0						
---	--	--	--	--	--	--

Question 25

6	2					
---	---	--	--	--	--	--

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER C

UPPER PRIMARY

Candidate Name Umireza Shahizan

Candidate No. C A N 6 9 1 9 1 2 4 3 9 9

Country UZB Samarkand

Level C

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

6 $\frac{2}{3}$

Question 22

10

Question 23

85

Question 24

55 munit

Question 25

25

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER E

INTERMEDIATE

Candidate Name Shoxrux Umirzogov Country Uzbekistan

Candidate No. C A N 8 6 8 2 1 2 4 5 5 0 Level E

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

1 7

Question 22

1

Question 23

2 0 2 5

Question 24

2 4

Question 25

1

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER D

JUNIOR

Candidate Name

Sohibjon Norgulov

Country

Uzbekistan

Candidate No.

C A N G 6 1 5 1 2 4 9 6 8

Level

D

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

1

Question 22

16

Question 23

A C

Question 24

4 2 0

Question 25

7 0

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER D

JUNIOR

Candidate Name

Temur Osranger

Country

UzB, Samarkand

Candidate No.

C A N 8 3 8 0 1 2 4 5 2 0

Level

D

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

0 1 2 3 4

Question 22

1 2 3 4 2 0 0

Question 23

1 2 3 4 5 6 9 0

Question 24

2 0 2 5 1 0 0 0 6

Question 25

4 0 0 1 2 3 4 5

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER C

UPPER PRIMARY

Candidate Name Ilkhridinov Ulugbek

Country Uzbekistan

Candidate No. C A N F 4 4 9 1 2 4 3 0 8

Level C1

Candidate Answer Sheet

Multiple Choice

Free Response

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Question 21

(30 + 24) : 2 = 27

Question 22

15

Question 23

53 cm²

Question 24

24 min

Question 25

23

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER A

LOWER PRIMARY

Candidate Name Kyochigeo Uligblk

Candidate No. CAN 1177123946

Country Malaysia

Level A

Candidate Answer Sheet

Multiple Choice

1	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
2	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
3	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
4	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
5	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
6	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
7	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
8	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
9	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
10	<input type="checkbox"/> A	<input type="checkbox"/> B	<input checked="" type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
11	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
12	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
13	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
14	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
15	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
16	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input checked="" type="checkbox"/> E
17	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
18	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D	<input type="checkbox"/> E
19	<input checked="" type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E
20	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E

Free Response

Question 21

3t a

Question 22

5.00 PM

Question 23

121

Question 24

2tq

Question 25

13

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER D

JUNIOR

Candidate Name Xamrakulova Yulduz Shurrol gizi

Country Uzb. Samarkand.

Candidate No. C A N 5 7 3 7 1 2 4 4 6 7

Level D

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

e i g h t

Question 22

f i v e

Question 23

Question 24

Question 25

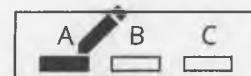
INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.

PAPER E

INTERMEDIATE

Candidate Name Zarniqa Zhamraulova

Country Uzbekistan

Candidate No. C A N 5 4 6 8 1 2 4 5 8 3

Level E

Candidate Answer Sheet

Multiple Choice

1	A	B	C	D	E
2	A	B	C	D	E
3	A	B	C	D	E
4	A	B	C	D	E
5	A	B	C	D	E
6	A	B	C	D	E
7	A	B	C	D	E
8	A	B	C	D	E
9	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E
14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E

Free Response

Question 21

15 _____

Question 22

20 25 _____

Question 23

20 25 _____

Question 24

3 60 _____

Question 25

21 _____

INSTRUCTIONS

Use a 2B or B pencil. You are not allowed to use a pen.

Questions 1 to 20

Mark only ONE option for each question. Colour in the box fully.

For example, if you think "A" is the best answer to the question, mark your answer sheet like this:



Questions 21 to 25

Fill in the boxes with digits or UPPERCASE alphabets only.

Each box may contain only ONE character.

Rub out COMPLETELY any answer you wish to change with an eraser.

Answers not clearly legible will be marked INVALID.

Do not write inside this box. For examiner use only.