

IELTS Listening Answer Sheet



Candidate Name

Candidate No. Centre No.

Test Date Day Month Year

Listening Listening Listening Listening Listening Listening Listening

Marker use only

Marker use only

Questions 1-20 with answer boxes and marker checkboxes.

Questions 21-40 with answer boxes and marker checkboxes.

Sample Answer Sheet

Marker 2 Signature:

Marker 1 Signature:

Listening Total:

