



MARKING AND ANALYSIS FOR 2006 QCA OPTIONAL TESTS BOOKING FORM

To book the service for 2011, please complete and return by post, fax or email to:

Benchmark North Ltd., 104 – 108 Wallgate, Wigan, WN3 4AB.

Tel: 01942 492479, Fax: 01942 323337, Email: kath.woods@benchmarknorth.co.uk

Please note we provide services on a first come, first served basis and acceptance will be subject to availability.

Benchmark North Ltd. will confirm if your booking has been accepted and an invoice will be issued at the end of the process.

SECTION 1 – SERVICE INFORMATION

Please indicate the number of pupils for each service required for each year group.

		Marking only	Analysis only	Marking and Analysis
YEAR 3	Mathematics	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Reading	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Spelling	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Writing	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
YEAR 4	Mathematics	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Reading	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Spelling	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Writing	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
YEAR 5	Mathematics	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Reading	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Spelling	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Writing	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

Please turn over

SECTION 2 – SCHOOL INFORMATION

Please provide the following information in BLOCK CAPITALS

School Name: _____

Contact name: _____

Address: _____

Postcode:

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Tel no: _____

Fax no: _____

Email address: _____



SECTION 3 – DEADLINE DATES

Up to 60 pupils per year group

For marking only or analysis only – we require a minimum of 3 weeks from receipt of scripts to returning them to school.

For marking and analysis – we require a minimum of 4 weeks from receipt of scripts to returning them to school.

More than 60 pupils per year group

For marking only or analysis only – we require a minimum of 4 weeks from receipt of scripts to returning them to school.

For marking and analysis – we require a minimum of 5 weeks from receipt of scripts to returning them to school.

Please complete the following information – if known.

Date of despatch of scripts to Benchmark: _____

Deadline for return of scripts to school: _____