

French / German / Spanish

OCR Advanced Subsidiary 3861 GCE Unit 2651

OCR Advanced Subsidiary 3862 GCE Unit 2661

OCR Advanced Subsidiary 3863 GCE Unit 2671

Speaking Working Mark Sheet

Please read the instructions printed overleaf before completing this form. One of these mark sheets, suitably completed, should be sent with the recording of **each** candidate.

| | | | | |
|-----------------|---------------|---------------|----------------|------------------------------|
| Language | French | German | Spanish | Please delete as appropriate |
|-----------------|---------------|---------------|----------------|------------------------------|

| | | |
|---------------------------|---------------------|------------------------------|
| Examination series | January/June | Please delete as appropriate |
|---------------------------|---------------------|------------------------------|

| | | | | |
|-------------|----------|----------|----------|----------|
| Year | 2 | 0 | 0 | 9 |
|-------------|----------|----------|----------|----------|

| | | | | | |
|----------------------|--|--|--|--|--|
| Centre number | | | | | |
|----------------------|--|--|--|--|--|

| | | | | | | |
|-----------------------|--|-------------------------|--|--|--|--|
| Candidate name | | Candidate number | | | | |
|-----------------------|--|-------------------------|--|--|--|--|

| | | |
|--|-------------------------------------|-------------|
| Role Play _____ (Enter letter) | Assessment Criterion | Mark |
| | Response to text (max 5) | |
| | Response to Examiner (max 5) | |
| | Quality of Language (max 5) | |

| | | |
|---|---|-------------|
| Presentation Title _____ _____ | Presentation and Discussion | Mark |
| | Topic presentation (max 20) | |
| | Spontaneity/fluency (max 15) | |
| | Pronunciation/intonation (max 5) | |
| | Quality of Language (max 5) | |

| | |
|-----------------------|--|
| Total (max 60) | |
|-----------------------|--|

Authentication by the teacher

I declare that, to the best of my knowledge, the work submitted is that of the candidate concerned. I have attached details of any assistance given beyond that which is acceptable under the scheme of assessment.

Name (please print) _____ Signature _____ Date _____

OR: Visiting Examiner

Name (please print) _____ Signature _____ Date _____

INSTRUCTIONS FOR COMPLETION OF THIS FORM

Teachers (component 01 – externally assessed):

- 1 One form should be used for each candidate.
- 2 Please ensure that the appropriate boxes at the top of the form are completed.
- 3 Leave all mark boxes blank.
- 4 Sign and date the form.

Examiners (component 02 – internally assessed and moderated by OCR and component 03 – visiting examiner):

- 1 One form should be used for each candidate.
- 2 Please ensure that the appropriate boxes at the top of the form are completed.
- 3 Enter the mark awarded for each assessment criterion in the appropriate box.
- 4 For each candidate calculate a total mark out of 60 by adding together the marks for all the assessment criteria.
- 5 Enter the total mark for the candidate in the relevant box.
- 6 Sign and date the form.