

Answer Sheet(Astronomy)

Student Number: _____ – _____ / Name _____.

/ 1 0 0

Circle your chosen answer. Example: a b c d e f

Q1	a <input checked="" type="radio"/> b c d e f	2 0
Q2	a b <input checked="" type="radio"/> c d e f	2 0
Q3	a b c <input checked="" type="radio"/> d e f	2 0
Q4	a b c <input checked="" type="radio"/> d e f	2 0
Q5	a <input checked="" type="radio"/> b c d e f	2 0

