



Surname							
Other Names							
Candidate Number	S						
Centre Number							
	d	d		m	m		
Date of Birth			-			-	
STEP Paper	2					3	
	○					○	
SHADE THE CIRCLE UNDER THE NUMBER							

BEFORE THE EXAMINATION STARTS

I have filled in my information above correctly.

Tick the box

I have read and understood ALL the requirements on this page.

DURING THE EXAMINATION

I have started each answer on a new page.

I have filled in ONE circle at the top of every page where I have written an answer.

I have crossed out ALL my rough work.

I have NOT removed any pages from this booklet.

I have NOT attached any extra sheets to this booklet.
Extra sheets will be removed and will not be marked.

DECLARATION

I understand that failure to follow the requirements on this page might mean some of my work is not marked.

I have followed all these requirements correctly and ticked ALL the checkboxes on this page.

This document was initially designed for print and as such does not reach accessibility standard WCAG 2.1 in a number of ways including missing text alternatives and missing document structure.

If you need this document in a different format please email admissionstesting@cambridgeassessment.org.uk telling us your name, email address and requirements and we will respond within 15 working days.