

NON-VERBAL REASONING

TEST PAPER 4

Read the following instructions carefully:

1. The test has 30 questions in total, split into three sections which must be timed separately:
Section 1 : Analogies [10 questions, 5 minutes]
Section 2 : Similarities [10 questions, 5 minutes]
Section 3 : Spatial Reasoning [10 questions, 5 minutes]
2. This is a multiple-choice test.
3. Work as carefully and as quickly as you can.
4. Answers should be marked on the answer sheet provided and not on this paper.
5. If you make a mistake, rub it out completely and put in your new answer.

Good Luck!

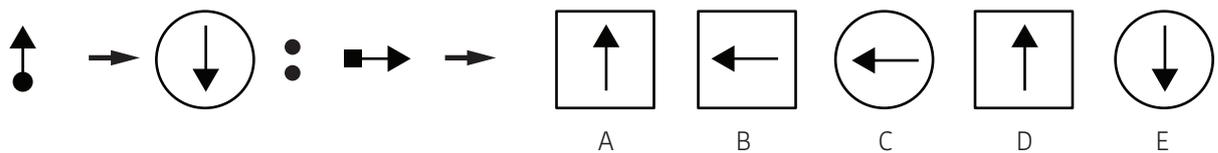


SECTION 1 - ANALOGIES

Instructions:

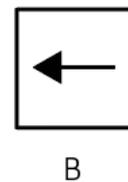
On the left there are two figures connected by an arrow. Now look at the third figure. Which of the five figures that follow is related to the third in a similar way as the first pair.

Example 1:



Answer:

Example	
A	<input type="checkbox"/>
B	<input checked="" type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>



Explanation:

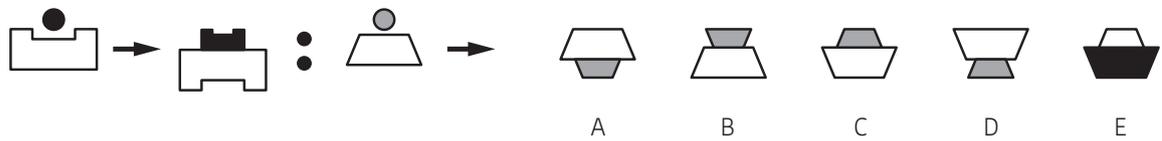
The arrow in the first figure is rotated 180° and the arrow tail becomes the outer shape of the arrow. In the third figure, the arrow should be rotated by 180°. Since its arrow tail is a square, the outer shape in the correct answer must also be a square. Therefore, the answer is option B.

ANALOGIES

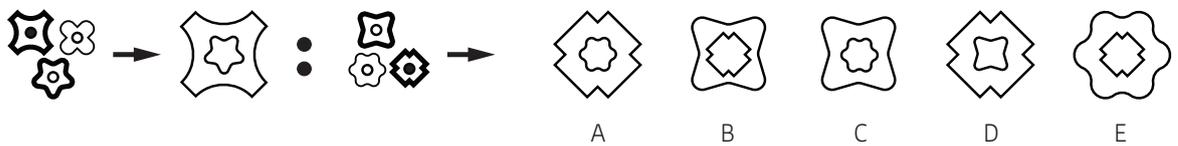
1



2



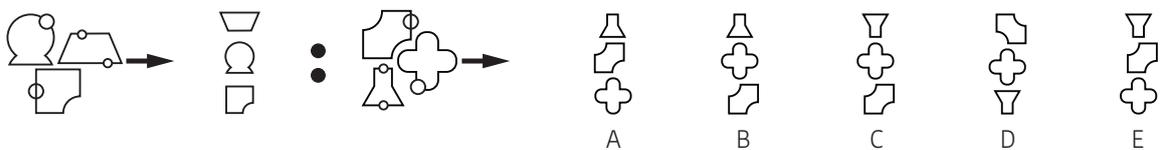
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4

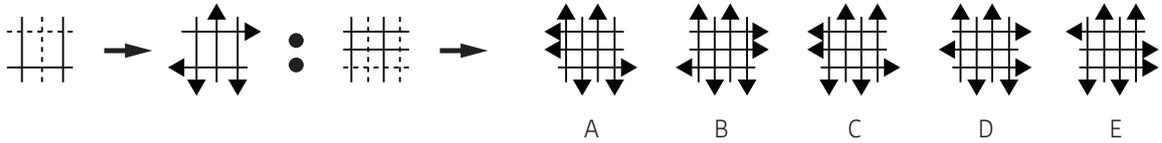


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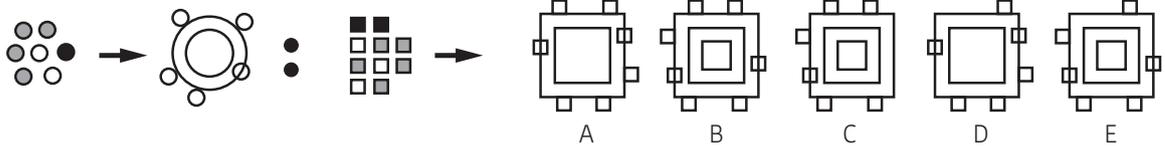


ANALOGIES

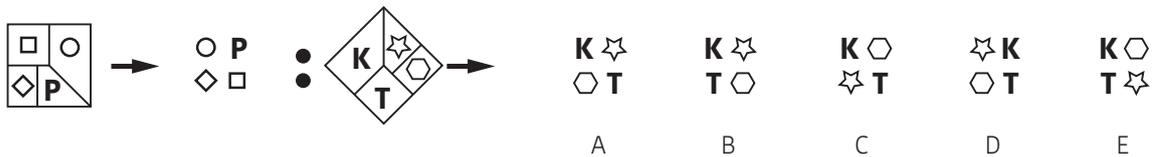
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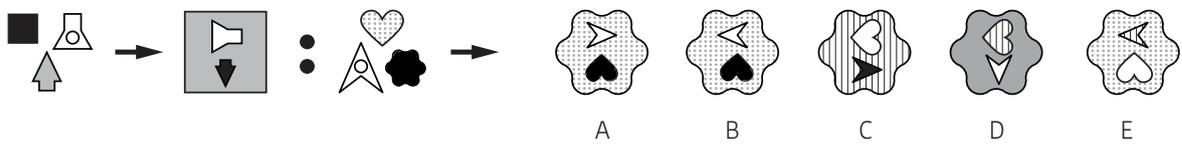
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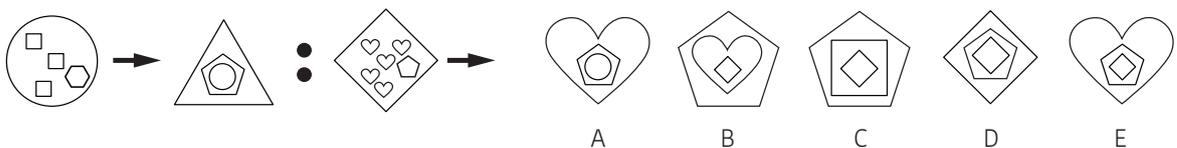
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9



10

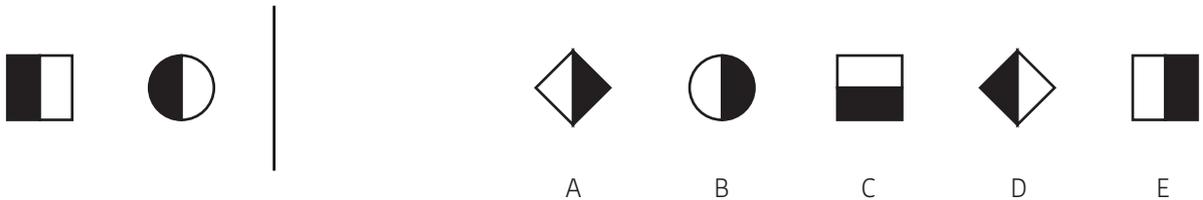


SECTION 2 - SIMILARITIES

Instructions:

The two or three figures on the left are alike in the same way. Choose which one of the five figures to the right of these is the most similar to the first two or three figures.

Example 2:



Answer:

Example	
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B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input checked="" type="checkbox"/>
E	<input type="checkbox"/>

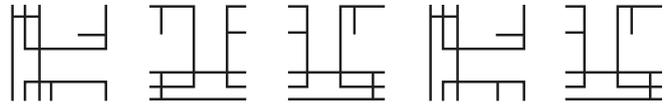


Explanation:

The shape is vertically divided into two. The left-hand portion is black-shaded, while the right-hand portion is white.

SIMILARITIES

11



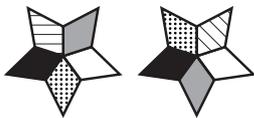
A B C D E

12



A B C D E

13



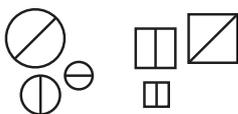
A B C D E

14



A B C D E

15



A B C D E

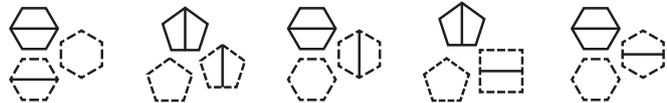
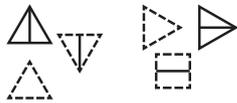
SIMILARITIES

16



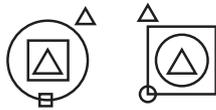
A B C D E

17



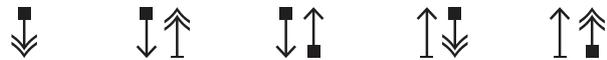
A B C D E

18



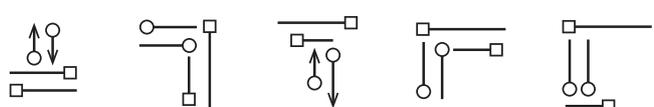
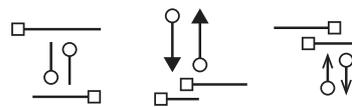
A B C D E

19



A B C D E

20



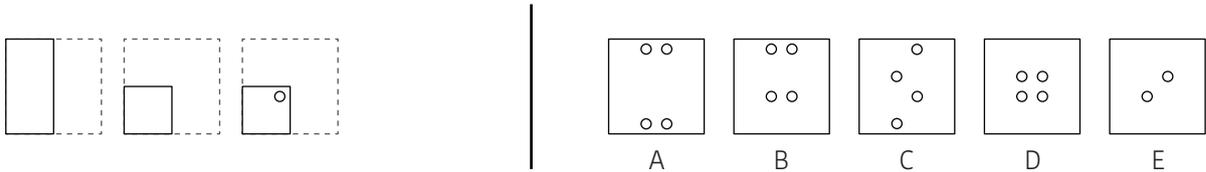
A B C D E

SECTION 3 - SPATIAL REASONING

Instructions:

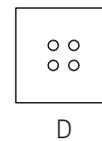
The figures on the left show how a square was folded and then punched. Work out which option shows the square when unfolded.

Example 3:



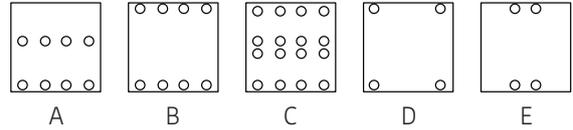
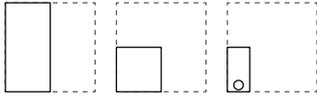
Answer:

Example	
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B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input checked="" type="checkbox"/>
E	<input type="checkbox"/>

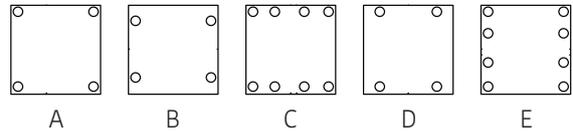
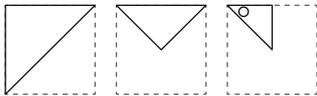


SPATIAL REASONING

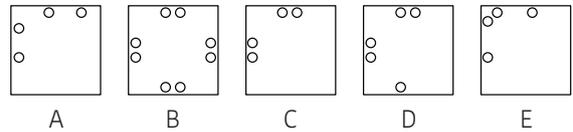
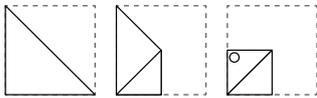
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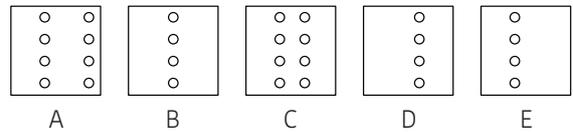
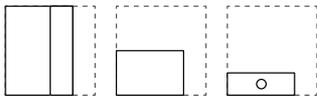
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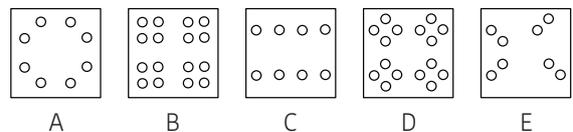
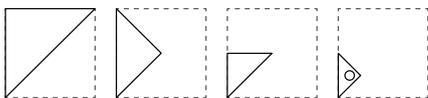
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24

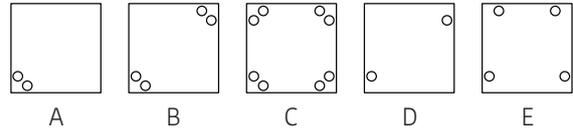
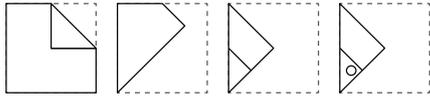


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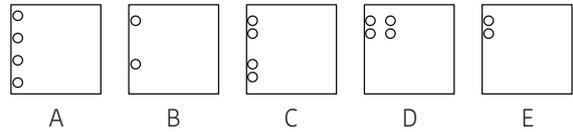
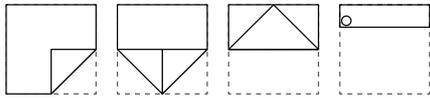


SPATIAL REASONING

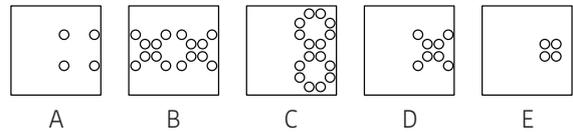
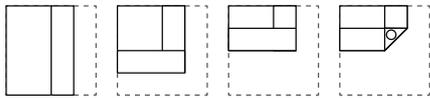
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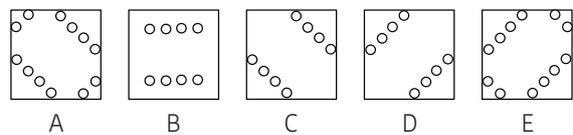
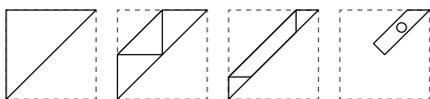
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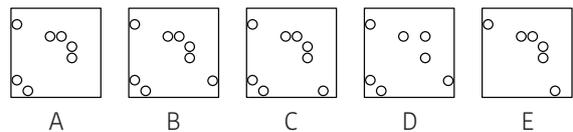
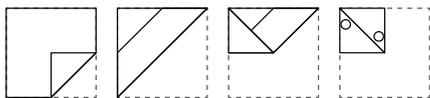
28



29



30



NON-VERBAL REASONING

TEST PAPER 4

ANSWER SHEET

Pupil's name:	Date of test:
School name:	Date of birth:

Instructions:

Mark your answers like this: A

Example 1	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10
A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>
B <input checked="" type="checkbox"/>	B <input type="checkbox"/>									
C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>
D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>
E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>
Example 2	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18	Q19	Q20
A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>
B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>
C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>
D <input checked="" type="checkbox"/>	D <input type="checkbox"/>									
E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>
Example 3	Q21	Q22	Q23	Q24	Q25	Q26	Q27	Q28	Q29	Q30
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B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>
C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>
D <input checked="" type="checkbox"/>	D <input type="checkbox"/>									
E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>

THE END