

**CARIBBEAN EXAMINATIONS COUNCIL****CARIBBEAN ADVANCED PROFICIENCY EXAMINATION®****SCHOOL-BASED ASSESSMENT MODERATION FEEDBACK FORM  
ACCOUNTING UNIT 2**

CENTRE CODE: \_\_\_\_\_ NAME OF CENTRE: \_\_\_\_\_

NAME OF TEACHER: \_\_\_\_\_ YEAR OF EXAMINATION: \_\_\_\_\_

**A. ADMINSTRATIVE DETAILS**

Number of class tests requested: \_\_\_\_\_

Number of class tests received: \_\_\_\_\_

	Yes	No
Candidates' names and registration numbers accurately recorded	<input type="checkbox"/>	<input type="checkbox"/>
A copy of each Module test included	<input type="checkbox"/>	<input type="checkbox"/>
A copy of the solutions for each test included	<input type="checkbox"/>	<input type="checkbox"/>
A mark scheme for each test submitted	<input type="checkbox"/>	<input type="checkbox"/>
The mark for each candidate indicated on the test	<input type="checkbox"/>	<input type="checkbox"/>

**B. SPECIFIC COMMENTS**

	Yes	No
1. The questions were relevant to the specific objectives of the Unit	<input type="checkbox"/>	<input type="checkbox"/>
2. The questions were appropriate to the CAPE level	<input type="checkbox"/>	<input type="checkbox"/>
3. The skills and abilities identified in the syllabus were adequately tested	<input type="checkbox"/>	<input type="checkbox"/>

If no, comment briefly \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. The quality of the solutions and mark schemes submitted was

Excellent  Satisfactory  Unsatisfactory 

5. The overall quality of the sample of tests submitted was

Excellent  Satisfactory  Unsatisfactory 

6. The teacher's marking was in general

Excellent  Satisfactory  Unsatisfactory