

CENTRE NO: _____	REGISTRATION NUMBER (Last four digits only)	CANDIDATE'S NAME	ORDER OF MERIT		MODULE 1 SCORE * (20 marks)	MODULE 2 SCORE * (20 marks)	MODULE 3 SCORE * (20 marks)	TOTAL SCORE (60 marks)	COMMENTS
			RANK IN GROUP (SCHOOL/CLASS) (1 st , 2 nd , 3 rd ...)	EXPECTED UNIT GRADE (i.e. I, II, III, IV, V, VI, or VII)					
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									
13.									
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15.									
16.									
17.									
18.									
19.									
20.									
21.									
22.									
23.									
24.									
25.									

* To determine Module scores, divide candidate's Total score by three. Fractional marks should not be awarded. In cases where the total score is not divisible by three, then (a) when the remainder is 1 mark, the mark should be allocated to Module 3, (b) when the remainder is 2, then a mark should be allocated to Module 3 and the other mark to Module 2. (For example, 34/60 = 11, 11, 12; 35/60 = 11, 12, 12).

NB: The order of merit is a standard requirement of several examining boards and testing agencies. Its purpose is to provide CXC with:

- (a) a quality control check in its examining process;
- (b) a ranking with which to compare 'basic discrepancies' between the CXC result and the school's normal assessment of the candidates;
- (c) an estimate of performance by the school, if, for example, allowances have to be made for adverse circumstances under Regulation 17.

The order of merit, should be informed by performance on the School-Based Assessments and any other assessment done by the teachers



FRM/EDPD/525

CARIBBEAN EXAMINATIONS COUNCIL
CARIBBEAN ADVANCED PROFICIENCY EXAMINATIONS®

RECORD OF MARKS FOR SCHOOL-BASED ASSESSMENT
(This record is confidential and must be kept secure.)

LOGISTICS AND SUPPLY CHAIN OPERATIONS
UNIT 1

YEAR OF EXAMINATION: _____

NAME OF CENTRE: _____

CENTRE CODE: _____

NAME OF TEACHER: _____

TEACHER'S SIGNATURE: _____

DATE: _____

NAME OF PRINCIPAL: _____

PRINCIPAL'S SIGNATURE: _____

DATE: _____

