

Foundation Certificate in Requirements Engineering

Practice Exam 2015-04-27

Answer sheet

Make a crossover (X) for your answer per question. Mark only one answer per question. Erase any answer you decide to change and mark your new chosen answer clearly.

1	(a)	(b)	(c)	(d)
2	(a)	(b)	(c)	(d)
3	(a)	(b)	(c)	(d)
4	(a)	(b)	(c)	(d)
5	(a)	(b)	(c)	(d)

21	(a)	(b)	(c)	(d)
22	(a)	(b)	(c)	(d)
23	(a)	(b)	(c)	(d)
24	(a)	(b)	(c)	(d)
25	(a)	(b)	(c)	(d)

6	(a)	(b)	(c)	(d)
7	(a)	(b)	(c)	(d)
8	(a)	(b)	(c)	(d)
9	(a)	(b)	(c)	(d)
10	(a)	(b)	(c)	(d)

26	(a)	(b)	(c)	(d)
27	(a)	(b)	(c)	(d)
28	(a)	(b)	(c)	(d)
29	(a)	(b)	(c)	(d)
30	(a)	(b)	(c)	(d)

11	(a)	(b)	(c)	(d)
12	(a)	(b)	(c)	(d)
13	(a)	(b)	(c)	(d)
14	(a)	(b)	(c)	(d)
15	(a)	(b)	(c)	(d)

31	(a)	(b)	(c)	(d)
32	(a)	(b)	(c)	(d)
33	(a)	(b)	(c)	(d)
34	(a)	(b)	(c)	(d)
35	(a)	(b)	(c)	(d)

16	(a)	(b)	(c)	(d)
17	(a)	(b)	(c)	(d)
18	(a)	(b)	(c)	(d)
19	(a)	(b)	(c)	(d)
20	(a)	(b)	(c)	(d)

36	(a)	(b)	(c)	(d)
37	(a)	(b)	(c)	(d)
38	(a)	(b)	(c)	(d)
39	(a)	(b)	(c)	(d)
40	(a)	(b)	(c)	(d)

Name: _____

Please complete form in BLOCK Capitals.	REQB Requirements Engineering Foundation Certificate Candidate Registration Form		
IS ENGLISH YOUR 1ST LANGUAGE YES / NO IF NO, WHAT IS?		Candidate Number <i>(Office use only)</i>	
PLEASE PRINT READABLE. The text below will be used in mailing the certificate.			
First Name		Surname	
Home Address		Work Name and Address	
Home Telephone Number		Work/Daytime Telephone Number	
N.B. All correspondence will be addressed to your home address unless otherwise stated			
Email address:			
Education: Highest qualification achieved and date achieved			
Date		Qualification	
Experience:		Number of years	
As a Requirements Engineer			
As a Developer or Tester			
Other: (please specify)			
Did you: (Please select one)		<input type="checkbox"/> Attend the just now finished REQB Foundation course? <input type="checkbox"/> Attend a REQB Foundation course earlier? <input type="checkbox"/> Study by yourself?	
Dates of course attended:			
REQB Training Provider:			
Please PRINT how you would like your name to appear on the certificate			
Candidate's Signature Date 2015-04-27			
Please tick here if you do not wish your examination mark to be released to your Training Provider. <input type="checkbox"/>			