

# Cambridge IGCSE<sup>®</sup>, Cambridge IGCSE (9–1) and Cambridge O Level Physical Education

## Cross-country running Order of Merit Form

Please follow these instructions carefully before completing the PDF *Cross-country running Order of Merit Form* provided below.

- 1 This form is an interactive PDF and may be completed in one of three ways:
  - on-screen and then printed out
  - on-screen and then printed out; add any internally moderated marks by hand
  - printed out and completed on paper by hand.
- 2 Additional copies of this form can be downloaded from the samples database [www.cambridgeinternational.org/samples](http://www.cambridgeinternational.org/samples)
- 3 Completing the *Cross-country running Order of Merit Form*:
  - Complete the information at the top of the form.
  - List the candidates in **rank order** of ability in the activity, highest scoring candidate first. Boys and girls should be in separate lists. Small entries can be entered on the same form.
  - The candidates must be identified on the form, usually by a numbered or lettered bib on front and back. This identifier must be written in the first column.
- 4 **Please keep a copy of the *Cross-country running Order of Merit Form*.**

### External Moderation

This form is to be used to show the external moderator the rank order for Cross-country running. This form **must** be submitted with the evidence for external moderation. A course map must also be submitted.

This form should be completed in candidate rank order (highest mark at the top) for all candidates.



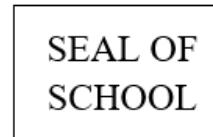
Please read previous printed instructions before completing this form.

<b>Centre Number</b>								<b>Exam Series</b>						<b>Year</b>				
<b>Centre Name</b>																		

Candidate Identification (e.g. Red 8, Blue 2 etc.)	Gender M/F	Candidate Number	Candidate Name	Distance	Time	Mark (25)	Criteria-specific information (if applicable)

 Relevant map(s) submitted for candidate(s).

Name of Assessor: ..... Signature: ..... Date: .....



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Cross-country running Order of Merit  
Please select syllabus and component below**

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<b>Centre Number</b>						<b>Exam Series</b>		<b>Year</b>			
<b>Centre Name</b>											

Candidate Identification (e.g. Red 8, Blue 2 etc.)	Gender M/F	Candidate Number	Candidate Name	Distance	Time	Mark (25)	Criteria-specific information (if applicable)

Relevant map(s) submitted for candidate(s).

Name of Assessor: ..... Signature: ..... Date: .....

