

Centre Number

Candidate Number

Name

UNIVERSITY OF CAMBRIDGE INTERNATIONAL EXAMINATIONS  
General Certificate of Education Ordinary Level

**COMMERCIAL STUDIES**

**7101/03**

Paper 3 Text Processing

October/November 2005

**2 hours**

INSERT 1

**READ THESE INSTRUCTIONS FIRST**

This insert is to be used for answering Question 3.

Write your Centre number, candidate number and name on all the work you hand in.

This document consists of 2 printed pages.



## HEALTH AND SAFETY EXECUTIVE

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INSERT 2

**READ THESE INSTRUCTIONS FIRST**

This insert is to be used for answering Question 5(a).  
Attempt this question **only** if you are using a **typewriter**.

Write your Centre number, candidate number and name on all the work you hand in.

This document consists of 2 printed pages.



# ACCIDENT REPORT FORM

## Injured Person

Name: .....

Address: .....

.....

Age: .....

Department: .....

## Details of Accident

Date and time: .....

Place of accident: .....

What happened? .....

.....

.....

.....

Witness/es: .....

Injuries: .....

.....

Treatment: .....

.....

.....

Was the injured person able to return to work immediately? YES/NO  
(Delete as appropriate)

Signature of person reporting accident: .....

Position: .....

Date: .....