



Section A: Test Section

A1. Test question 1

Q	U	E	X	F															
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A2. Test question 2

Option 1 ☐

Option 2 ☐

Option 3 ☐

Option 4 ☒

Option 5 ☒

Section B: Test Section 2

B1. Test question 1 in section 2

	Option 1	Option 2	Option 3	Option 4	Option 5
Sub question 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sub question 2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sub question 3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>