



1er Apellido / 1er Cognom	2º Apellido / 2º Cognom	Nombre / Nom
D.N.I.		Plaza a cubrir / Lloc a cobrir <b>BOLSA TRABAJADOR IA SOCIAL</b>
Ejercicio / Exercici <b>1er ÚNICO EJERCICIO</b>		Fecha / Data <b>11/12/2023</b>

Firma del opositor / Firma de l'opositor

HOJA DE TEST / FULL DE TEST

1	A	B	<input checked="" type="checkbox"/>	D	26	<input checked="" type="checkbox"/>	B	C	D	51	A	B	C	D	76	A	B	C	D
2	A	B	C	<input checked="" type="checkbox"/>	27	A	<input checked="" type="checkbox"/>	C	D	52	A	B	C	D	77	A	B	C	D
3	A	B	C	<input checked="" type="checkbox"/>	28	<input checked="" type="checkbox"/>	B	C	D	53	A	B	C	D	78	A	B	C	D
4	A	B	<input checked="" type="checkbox"/>	D	29	A	B	<input checked="" type="checkbox"/>	D	54	A	B	C	D	79	A	B	C	D
5	A	B	C	<input checked="" type="checkbox"/>	30	A	B	<input checked="" type="checkbox"/>	D	55	A	B	C	D	80	A	B	C	D
6	A	<input checked="" type="checkbox"/>	C	D	31	A	B	C	<input checked="" type="checkbox"/>	56	A	B	C	D	81	A	B	C	D
7	A	B	C	<input checked="" type="checkbox"/>	32	A	B	C	<input checked="" type="checkbox"/>	57	A	B	C	D	82	A	B	C	D
8	<input checked="" type="checkbox"/>	B	C	D	33	A	B	C	<input checked="" type="checkbox"/>	58	A	B	C	D	83	A	B	C	D
9	A	<input checked="" type="checkbox"/>	C	D	34	A	<input checked="" type="checkbox"/>	C	D	59	A	B	C	D	84	A	B	C	D
10	<input checked="" type="checkbox"/>	B	C	D	35	<input checked="" type="checkbox"/>	B	C	D	60	A	B	C	D	85	A	B	C	D
11	<input checked="" type="checkbox"/>	B	C	D	36	A	<input checked="" type="checkbox"/>	C	D	61	A	B	C	D	86	A	B	C	D
12	<input checked="" type="checkbox"/>	B	C	D	37	A	B	C	D	62	A	B	C	D	87	A	B	C	D
13	A	<input checked="" type="checkbox"/>	C	D	38	A	B	C	D	63	A	B	C	D	88	A	B	C	D
14	A	B	C	<input checked="" type="checkbox"/>	39	A	B	C	D	64	A	B	C	D	89	A	B	C	D
15	A	B	C	<input checked="" type="checkbox"/>	40	A	B	C	D	65	A	B	C	D	90	A	B	C	D
16	A	B	C	<input checked="" type="checkbox"/>	41	A	B	C	D	66	A	B	C	D	91	A	B	C	D
17	A	B	C	<input checked="" type="checkbox"/>	42	A	B	C	D	67	A	B	C	D	92	A	B	C	D
18	A	<input checked="" type="checkbox"/>	C	D	43	A	B	C	D	68	A	B	C	D	93	A	B	C	D
19	A	B	C	<input checked="" type="checkbox"/>	44	A	B	C	D	69	A	B	C	D	94	A	B	C	D
20	A	<input checked="" type="checkbox"/>	C	D	45	A	B	C	D	70	A	B	C	D	95	A	B	C	D
21	A	B	C	<input checked="" type="checkbox"/>	46	A	B	C	D	71	A	B	C	D	96	A	B	C	D
22	A	<input checked="" type="checkbox"/>	C	D	47	A	B	C	D	72	A	B	C	D	97	A	B	C	D
23	A	B	C	<input checked="" type="checkbox"/>	48	A	B	C	D	73	A	B	C	D	98	A	B	C	D
24	A	B	C	<input checked="" type="checkbox"/>	49	A	B	C	D	74	A	B	C	D	99	A	B	C	D
25	A	B	<input checked="" type="checkbox"/>	D	50	A	B	C	D	75	A	B	C	D	100	A	B	C	D