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| --- | --- | --- |
| **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Surname:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Nber: \_\_\_\_ Grade/Class:** \_\_\_\_\_ | | |
| **Assessment:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Teacher’s signature:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Parent’s signature:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

1. **Listen and choose.**



1. **Touch your \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**



1. **Wave your \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**



1. **Clap your \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**



1. **Stamp your \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**



1. **Point to your \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

**Script:**

1. **Touch your nose.**
2. **Wave your arm.**
3. **Clap your hands.**
4. **Stamp your feet.**
5. **Point to your head.**