








# ENGLISH EXAM

## Reading

Name: _____ Surname: _____ N <sup>ber</sup> : _____ Grade/Class: _____	
Assessment: _____	Date: _____
 <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	Teacher's signature: _____ Parent's signature: _____


1. Circle the right one for YOU.


My hair is brown-red-pink-blonde-black.

My eyes are green-brown-blue-black.

2. Match.

 I have one...

 I have two...

 I have ten ...

 Fingers

 Nose

 Mouth

 Eyes

 Arms

 Knees

 Ears

