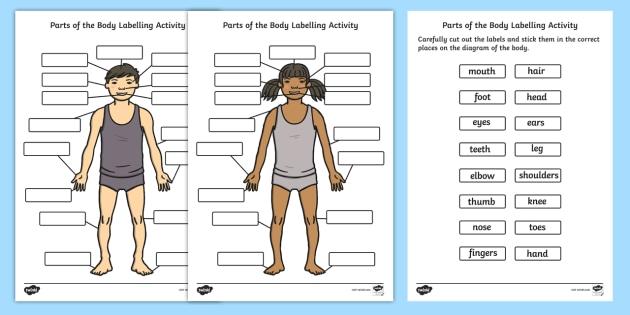
|  |  |  |
| --- | --- | --- |
| **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Surname:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Nber: \_\_\_\_ Grade/Class:** \_\_\_\_\_ | | |
| **Assessment:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Date:**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

1. **Look and tell the body parts to your partner, singular and plural forms.**

**Student A (Left side) Student B (Top and Right side)**



**Answer key**

Student A (Left side)

hair

ear

mouth

shoulder

hand

finger

leg

foot

Student B (Top and right side)

head

eye

nose

mouth / lips / tongue

arm

thumb / finger

knee

toe / finger