








ENGLISH EXAM

Reading



Name: _____ Surname: _____ N ^{ber} : _____ 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. Draw the things that are given.

Witch	
Ghost	
Vampire	

2. Read and fill the gaps using the words from the box.

sweets / Halloween / cat / bats / cake / jack o'lanterns

- a) Happy _____!
- b) Do you have your _____? Candy is my favourite.
- c) Do you like _____? They are so cute!
- d) There is a black _____ on the window.
- e) I love scary _____!