**ENGLISH EXAM**

**Reading**

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

1. **Draw the things that are given.**



|  |  |
| --- | --- |
| Witch |  |
| Ghost |  |
| Vampire |  |

1. **Read and fill the gaps using the words from the box.**

**sweets / Halloween / cat / bats / cake / jack o’lanterns**

1. Happy !
2. Do you have your ? Candy is my favourite.
3. Do you like ? They are so cute!
4. There is a black on the window.
5. I love scary !



Assessing EFL Students