








Name: _____ Surname: _____ N ^{ber} : _____ Grade/Class: _____			
Assessment: _____	Date: _____		
 <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Teacher's signature: _____</td> <td style="width: 50%; text-align: center;">Parent's signature: _____</td> </tr> </table>	Teacher's signature: _____	Parent's signature: _____
Teacher's signature: _____	Parent's signature: _____		

1. Complete or answer the questions.

I make p_____ with a f_____ p_____

What ingredients do you use to make a pancake? I use f_____, e_____, s_____, and m_____.

Do you like pancake Tuesdays? Why? _____

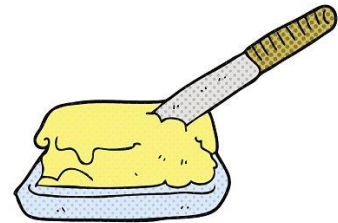
2. Complete the words.



F_____ p_____



P_____



B_____



S_____



M_____



L_____



F_____



E_____