








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: _____

Talk about yourself and reply to the questions.



1. What is your name?
2. Where do you live?
3. What country you are from?
4. What do you like to do?
5. What food do you like?
6. Do you have friends from other countries?
7. Do know any people from Turkey or Portugal
8. Have you visited Germany or Finland?
9. Do you know where to find Spain on a map?
10. Do you know the name of the capital of Greece?