




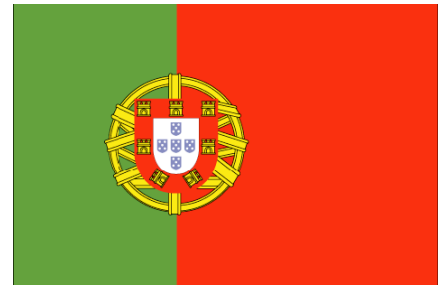




Name: _____ Surname: _____ N ^{ber} : ____ Grade/Class: _____	
Assessment: _____	Date: _____
 <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	<p>Teacher's signature: _____</p> <p>Parent's signature: _____</p>

Circle the correct country.



Turkey

Portugal

Greece

Greece

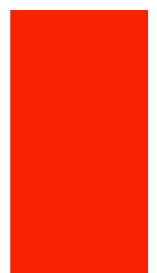
Turkey

Portugal

Portugal

Greece

Turkey



Ireland

Italy

Spain

Italy

Spain

Italy

Spain

Ireland

Ireland