









# ENGLISH EXAM

## Reading



Name: _____ Surname: _____ N <sup>ber</sup> : _____ Grade/Class: _____		
Assessment: _____		Date: _____
 <input type="checkbox"/>	 <input type="checkbox"/>	 <input type="checkbox"/>
 <input type="checkbox"/>	 <input type="checkbox"/>	 <input type="checkbox"/>
Teacher's signature: _____		Parent's signature: _____

### 1. Choose the correct answer.



Sister      Brother      Mother



Father      Grandfather      Sister



Grandmother      Brother      Sister



Grandfather      Grandmother      Brother



Brother      Mother      Father



Sister      Grandmother      Brother