

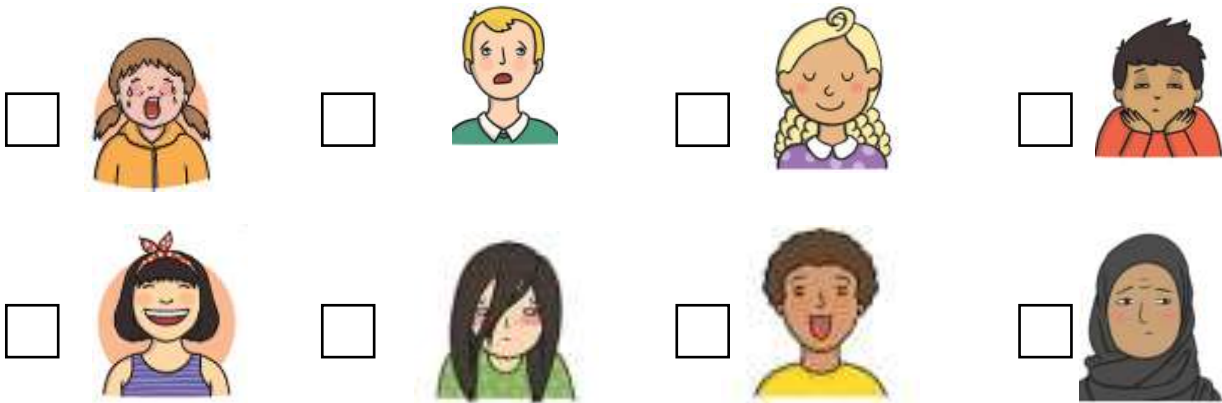


# ENGLISH EXAM

## LISTENING

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"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Teacher's signature: _____</td> <td style="width: 50%;">Parent's signature: _____</td> </tr> </table>	Teacher's signature: _____	Parent's signature: _____
Teacher's signature: _____	Parent's signature: _____		

### 1) Listen and number.



### 2) Listen and circle the one you DON'T hear.





### **TRANSCRIPT**

#### **EXERCISE 1**

1. Confused
2. Happy
3. Sad
4. Bored
5. Scared
6. Excited

#### **EXERCISE 2**

1. Happy, sad, angry
2. Embarrassed, happy, bored
3. Scared, angry, sad
4. Happy, embarrassed, scared