



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%; text-align: center;">Teacher's signature:</td> <td style="width: 50%; text-align: center;">Parent's signature:</td> </tr> <tr> <td style="height: 40px;"> </td> <td style="height: 40px;"> </td> </tr> </table>	Teacher's signature:	Parent's signature:		
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Read and match the sentences with the correct places. Add the corresponding letter under the number in the box.



- |  |                |
|--|----------------|
| 1. We often watch TV in this room                | A. Playroom    |
| 2. My mother cooks dinner in this room.          | B. Bedroom     |
| 3. My father parks his car here.                 | C. Bathroom    |
| 4. We eat our breakfast in this room.            | D. Living room |
| 5. We have many flowers and trees here.          | E. Garden      |
| 6. This is the room I sleep in.                  | F. Kitchen     |
| 7. When I come in I leave my shoes in this room. | G. Garage      |
| 8. I take a shower in this room.                 | H. Dining room |
| 9. I have all my toys in this room.              | I. Hall        |

1.	2.	3.	4.	5.	6.	7.	8.	9.



## ENGLISH EXAM

### Reading



Key:

1 – D

2 – F

3 – G

4 – H

5 – E

6 – B

7 – I

8 – C

9 – A