








ENGLISH EXAM

Listening

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: _____

1. Listen and choose.

1. My name's Jennifer. **YES / NO**
2. My surname is W-H-A-T-L-A-Y. **YES / NO**
3. I'm from Canada. **YES / NO**
4. I'm British. **YES / NO**
5. I'm 13 years old. **YES / NO**



1. My name's Pablo. **YES / NO**
2. My surname is S-A-N-U-R-A. **YES / NO**
3. I'm from Brazil. **YES / NO**
4. I'm French. **YES / NO**
5. I'm 17 years old. **YES / NO**





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Script:

1. Hi! My name's Jennifer. My surname is Whitley. It's W-H-I-T-L-E-Y. I'm from Britain, and I'm British. I'm 14 years old.

2. Hello! My name's Carlos. My surname is Sanuro. It's S-A-N-U-R-O. I'm from Brazil, and I'm Brazillian. I'm 17 years old.