**1. Listen and order.**



|  |
| --- |
| **Name: Surname: Nber: Grade/Class:**  |
| **Assessment:**  | **Date:**  |
| **Teacher’s signature:** | **Parent’s signature:** |









**ENGLISH EXAM**

Listening

 BRUSH MY HAIR

 PLAY FOOTBALL

 DO EXERCISE

 DO MY HOMEWORK

 WAKE UP

Assessing EFL Students