




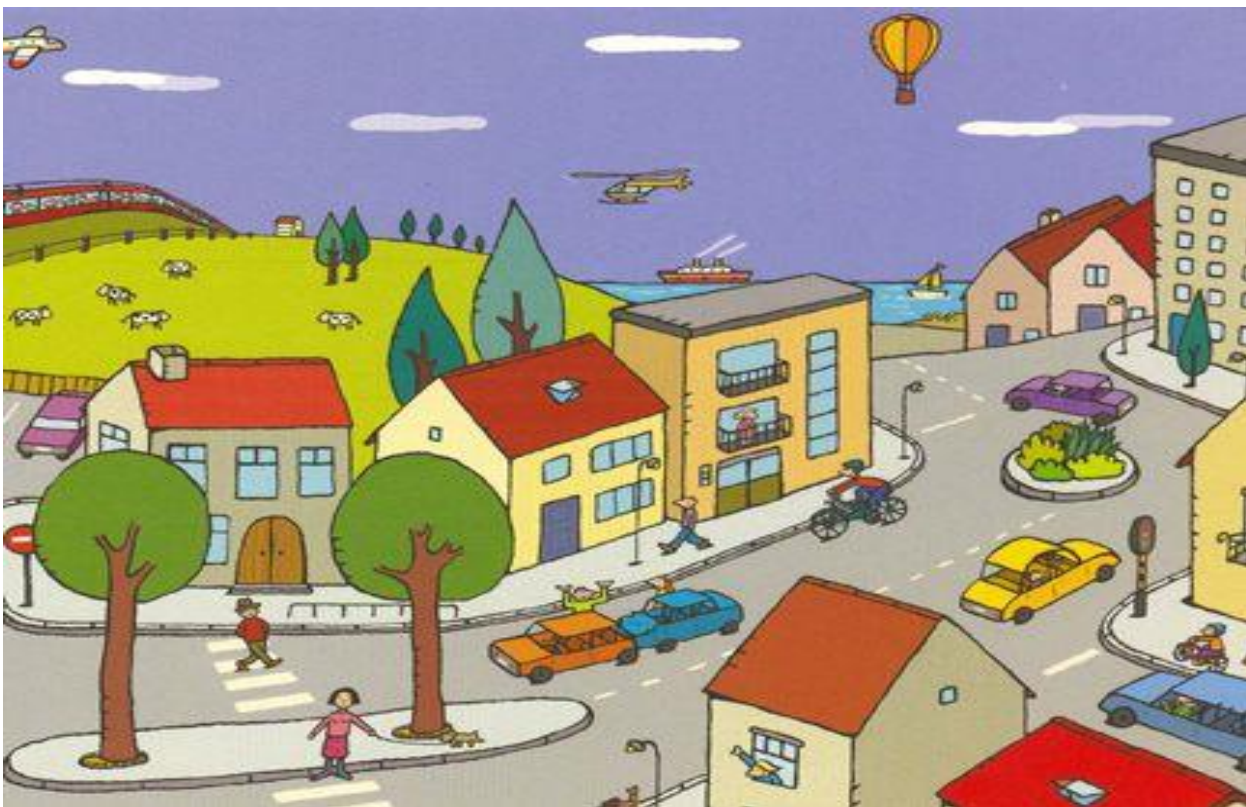




A1

My city

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: _____



I would like you to have a look at this picture and then to answer my questions.

Do you like this small town? (Why/ Why not?)

Is there a school in this town?

How many cars can you see on the road?

Now, tell me something about your town. Is it a big /small town? Are there any shops in your town?