





Name: _____ Surname: _____ Nber: _____ 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. Find the words.


DAILY ROUTINE

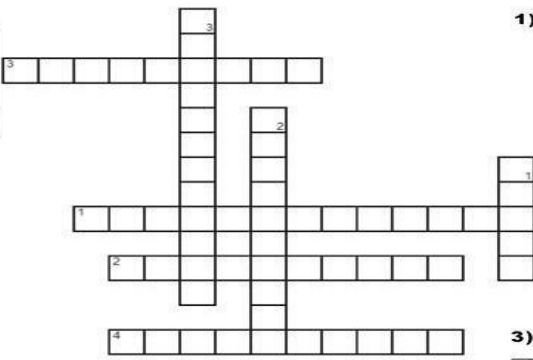
ACROSS

1) 

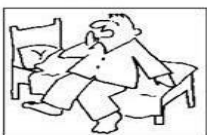
2) 


3) 


4) 



DOWN

1) 

2) 

3) 

- Across:
- 1) H _ _ b _ _ _ _ _
 - 2) G _ t _ s _ _ _ _
 - 3) H _ _ L _ _ _
 - 4) H _ _ D _ _ _ _

- Down:
- 1) G _ _ u _
 - 2) G _ _ d _ _ _ _ _
 - 3) B _ _ _ m _ t _ _ _