**1. Answer the following questions.**

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

* What do you do in the morning?

**ENGLISH EXAM**

Writing

Draw it:

* What do you do in the afternoon?

Draw it:

* What do you do at night?

Draw it:

Assessing EFL Students