








ENGLISH EXAM

Listening

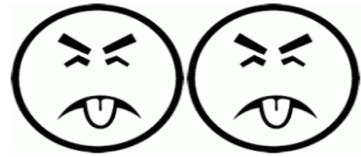


Name: _____ Surname: _____ N°ber: _____ Grade/Class: _____	
Assessment: _____	Date: _____
 <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	Teacher's signature: _____
	Parent's signature: _____

1. Listen and color likes and dislikes.



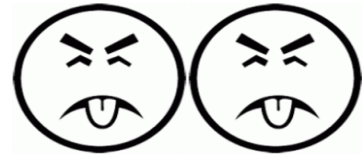
Alison



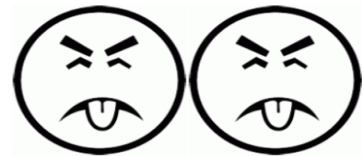
James



Amir



Nawal





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Script

Hi! My name's Alison. I like pink and orange but I don't like blue and red.

Hello! My name's James. I like green and brown but I don't like purple and red.

Hi! I'm Amir. I like blue and grey but I don't like pink and black.

Hello! I'm Nawal. I like yellow and white but I don't like red and orange.