








# ENGLISH EXAM

## LISTENING



Name: _____ Surname: _____ N <sup>ber</sup> : _____ 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: _____

Listen and number.





# ENGLISH EXAM

## LISTENING



### TRANSCRIPT

- 1) Stand up
- 2) Close the door
- 3) Be quiet
- 4) Clap your hands
- 5) Clean the board
- 6) Sit down
- 7) Colour the picture
- 8) Read the book
- 9) Raise your hand
- 10) Open the book



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### ANSWER KEY

- 1) Stand up
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- 10) Open the book