








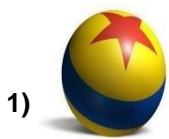
ENGLISH EXAM

Reading



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. Choose the correct option.



- a. Ball
- b. Bell
- c. Bill



- a. Doll
- b. Book
- c. Teddy bear



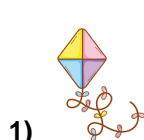
- a. Race
- b. Car
- c. Cause



- a. Screen
- b. Bicycle
- c. Scooter



- a. Bicycle
- b. Shoes
- c. Paint



- a. Kati
- b. Kite
- c. Keta