








Listening Transcription



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: _____

**1. Listen and match. Then, colour them.**

1. GREEN ROBOT
2. BLACK KITE
3. ORANGE BLOCKS
4. YELLOW TRAIN
5. PINK PLANE

**2. Listen and complete the sentences.**

1. THREE
2. WINDY
3. ROBOT / SPEAK
4. TRAVEL
5. PLANE