

Name: .....  
Class: .....  
Student ID code: .....

Unit 2 What do you do?  
Oral test

Answer these questions.

1. What do you do?

.....

2. Where do you go to school?

.....

3. How do you like it?

.....

4.1 Which days do you get up early?

.....

4.2 Which days do you get up late?

.....

5. What do you usually do in the morning?

.....

6. What's something you do before English class?

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7. What do you usually do on Saturday evenings?

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8. Which days do you stay up late?

.....

9. Which days do you go to bed early?

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10. What do you do after dinner on weeknights?

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11. What do you do after lunch on weekends?

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