

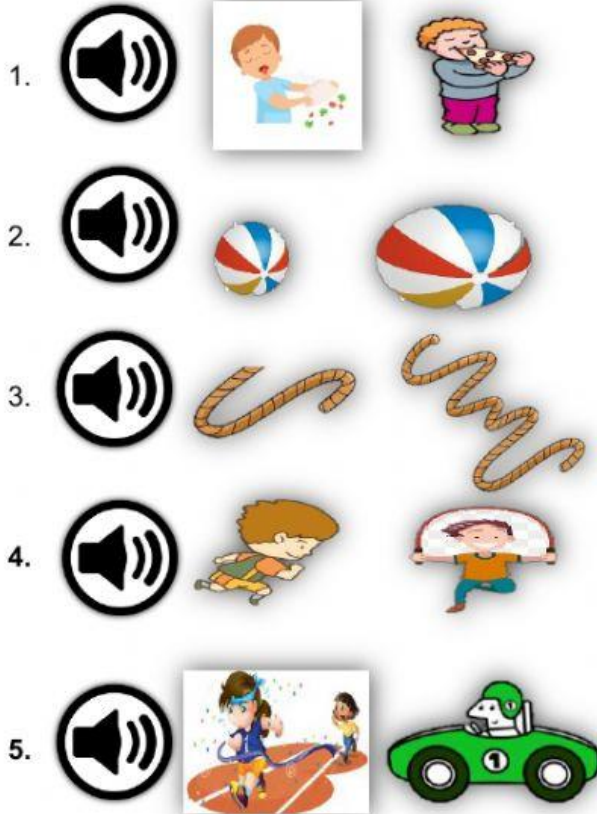
Student Level: Primary 3

UNIT 2

Subject: English

Name: _____ Class: _____ No: _____

UNIT 3
LISTENING



Assessment by	Myself	Friend	Teacher	Parents	Recommendation
Excellent [9-10]					
Good [7-8]					
Fair [5-6]					Sign.
Poor [1-4]					Date:

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