NAME:_____SURNAME:_____CLASS:_____ DATE:_____

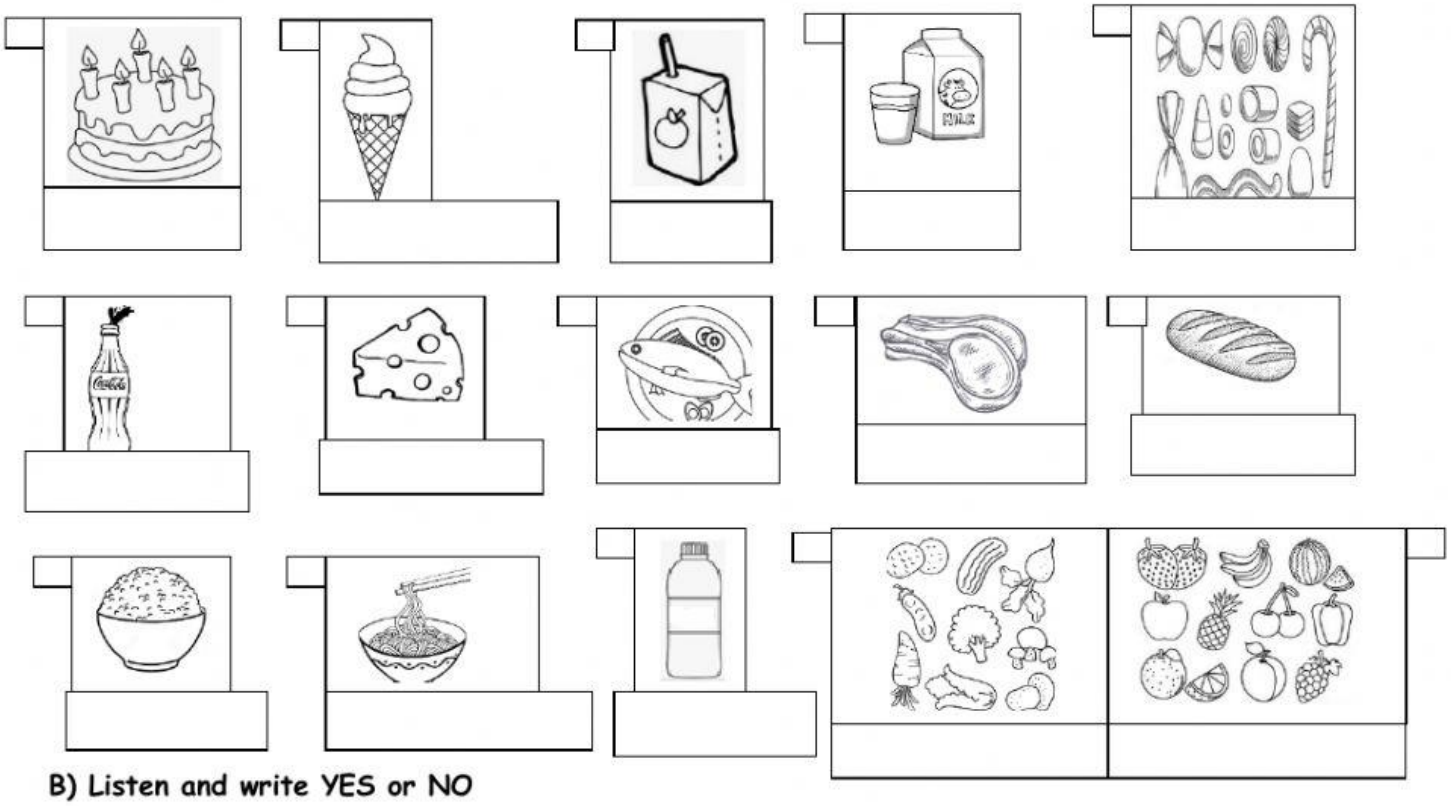
FOOD TEST-MAY

LISTENING: ___	/15
WRITING: ____	/15

1 2 3 4 5 6 7 8

9 10 11 12 13 14 15

A) Listen, number and write:



B) Listen and write YES or NO



LISTENING:	/3

C) Listen again and complete:

WRITING: ____	/2

- ___ YOU LIKE MILK, ZOLA? _____
- DO YOU_____ CAKE, DANNY? _____

LIVEWORKSHEETS

D) Write about you:

WRITING: ____ /2

☺ _____

☹ _____

E) WHAT'S YOUR FAVOURITE FOOD? _____

WRITING: ____ /1

HELP WORDS

BREAD	CHEESE	CAKE
FRUIT	FISH	COKE
NOODLES	MEAT	JUICE
RICE	MILK	ICE CREAM
VEGETABLES		SWEETS
WATER		

DO YOU LIKE….? YES, I DO ☺ NO, I DON'T ☹	I LIKE… ☺ I DON'T LIKE ☹ MY FAVOURITE FOOD IS…

LIVEWORKSHEETS