

ASSESSMENT WORKSHEET

Name: _____

Date: _____

Skill: Read abbreviations (Titles, Days, Months, Places)**People**

1.Mr. _____

2.Ms. _____

3.Mrs. _____

4.Dr. _____

5.Prof. _____

Measurement

1.cm _____

2.m _____

3.in _____

4.kg _____

5.gm _____

Place and Time

1.Bldg. _____

2.Rd. _____

3.Hr _____

4.Min _____

5.Sec _____

Days and Months

1.Sun _____

2.Wed _____

3.Jan _____

4.Jul _____

5.Sept _____

ASSESSMENT WORKSHEET

Name:

Date:

Skill: Match (Titles, Days, Months, Places)

Jan

July

Feb

June

Mar

January

Apr

April

May

May

Jun

December

Jul

October

Aug

November

Sept

February

Oct

August

Nov

September

Dec

March

ASSESSMENT WORKSHEET	
Name:	Date:
Skill: Match (Titles, Days, Months, Places)	

Sun

Monday

Mon

Friday

Tue

Saturday

Wed

Tuesday

Thurs

Sunday

Fri

Thursday

Sat

Wednesday

ASSESSMENT WORKSHEET

Name:

Date:

Skill: Read direction signs.



. Down



. No Entry



. Up



. Left



. Right



. Keep Right



. Keep Left



. U-Turn

ASSESSMENT WORKSHEET

Name:

Date:

Skill: Reads informational Signs



. Telephone

. Gasoline

. Men's Toilet

. Hospital

. Restaurant

. Medical

. School Bus Stop

. Parking

ASSESSMENT WORKSHEET

Name:

Date:

Skill: Reads warning and safety signs.



. Stop



. Exit



. Men's Toilet



. No Entry



. Stop (Car)



. Women's Toilet



. Go (Car)



. No U-Turn