



Name and Last name:

Grade and Section:

# WAS / WERE YES / NO QUESTIONS

Complete each question using Was or Were.  
Answer each question using Yes / No answers.

1. \_\_\_\_\_ Mary sleepy? \_\_\_\_\_.



2. \_\_\_\_\_ Sue and Max nervous? \_\_\_\_\_.



3. \_\_\_\_\_ Tony scared? \_\_\_\_\_.



4. \_\_\_\_\_ Mandy hot? \_\_\_\_\_.



5. \_\_\_\_\_ they hungry? \_\_\_\_\_.



6. \_\_\_\_\_ he thirsty? \_\_\_\_\_.

