



SEP IEEPO  
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Elementary Bilingual School  
Code:20PPR0107H School Zone: 055  
"Today quality of teaching – Tomorrow quality of living"

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

I. Read and write, Use *You must or mustn't*.

ride your bike listen to loud music eat lots of sweets  
take some medicine ~~go on the roundabout~~ stay in bed

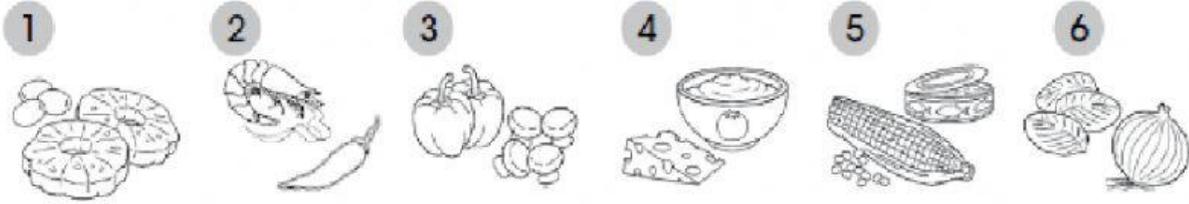
1. I feel dizzy. \_\_\_\_\_
2. I've got sore throat \_\_\_\_\_
3. I've got flu \_\_\_\_\_
4. I feel sick \_\_\_\_\_
5. I've got a broken leg \_\_\_\_\_

II. Circle the correct word and answer the questions.



1. Has she got **flu / temperature**?  
Yes, \_\_\_\_\_.
2. Do Megan and Anne **feel sick / feel dizzy**?  
Yes, \_\_\_\_\_.
3. Does James **feel sick / feel dizzy**?  
Yes, \_\_\_\_\_.
4. Has he got **sore throat / earache**?  
Yes, \_\_\_\_\_.
5. Have you got **stomach ache / headache**?  
Yes, \_\_\_\_\_.

III. Look write the food and match



1. Do you prefer olives or pineapple?

2. Do \_\_\_\_\_?

3. Do \_\_\_\_\_?

4. Do \_\_\_\_\_?

5. Do \_\_\_\_\_?

6. Do \_\_\_\_\_?

a I prefer prawns

b I prefer tomato sauce

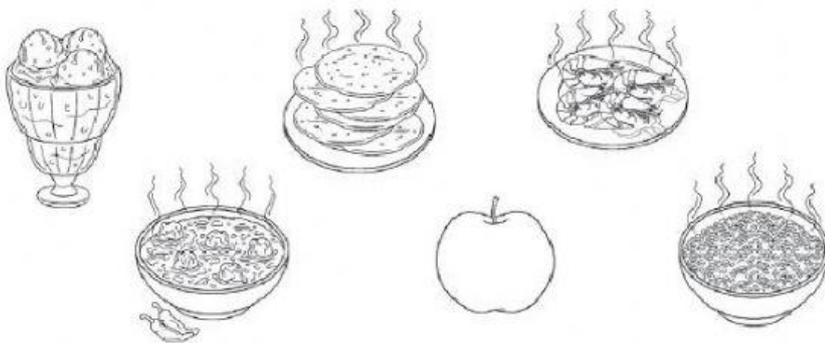
c I prefer sweetcorn

d I prefer olives

e I prefer spinach

f I prefer mushrooms

IV. Classify the words.



plain

spicy

crunchy

savoury

soft

sweet

prawns	Ice cream	rice	curry	pancakes	apple