

Name: _____

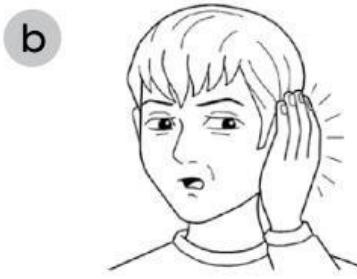
Class: _____



Listening

1 Listen and match.

Track 08



Monday

Tuesday

Wednesday

Thursday

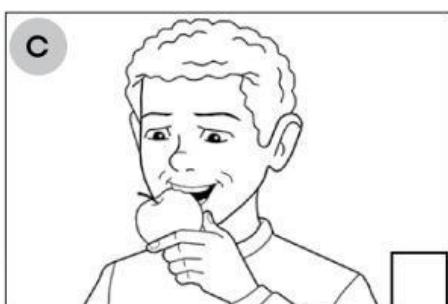
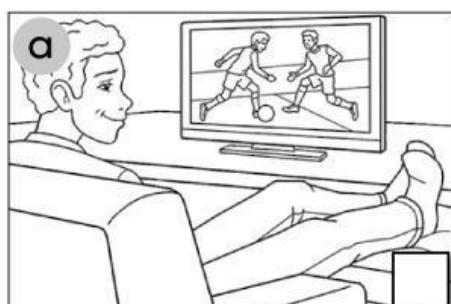
Friday

Saturday



2 Listen and number.

Track 09



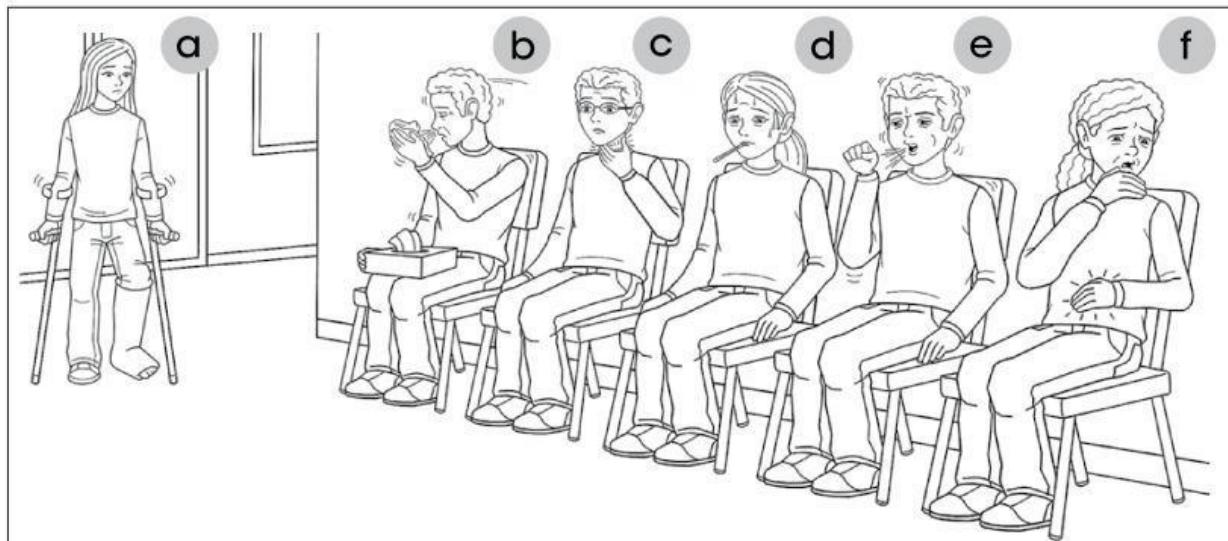
10



Name: _____



Class: _____

Reading**3** Look, read and write the letters.

1 She's got a temperature. **d**
 2 He's got a sore throat.
 3 She's got a broken leg.

4 He's got a cold.
 5 She feels sick.
 6 He's got a cough.

10

4 Read and match.

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

a You mustn't eat lots of sweets.
b You mustn't go on the roundabout.
c You must take some medicine.
d You mustn't ride your bike.
e You mustn't go to school.
f You mustn't listen to loud music.

10



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Class: _____

Writing**5 Look and write.**

1 Has Amy got flu ?
Yes, she has.

2 Do Megan and Anne ?
Yes, they do.

3 Does James ?
Yes, he does.

4 Has Sam got ?
Yes, he has.

5 Have you got ?
Yes, I have.

6 Have you got ?
Yes, I have.

6 Look and write.

1 How often do you eat breakfast ?



2 How often ?

3 How often ?

4 How often ?



5 How often ?

6 How often ?