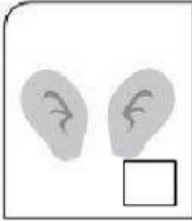
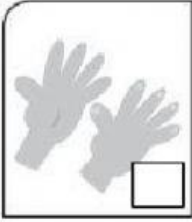
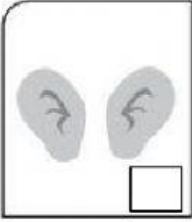




1. LISTEN AND TICK

|    |                                                                                   |                                                                                   |    |                                                                                    |                                                                                     |
|----|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 1. |  |  | 2. |  |  |
|    | <input type="checkbox"/>                                                          | <input type="checkbox"/>                                                          |    | <input type="checkbox"/>                                                           | <input type="checkbox"/>                                                            |
| 3. |  |  | 4. |  |  |
|    | <input type="checkbox"/>                                                          | <input type="checkbox"/>                                                          |    | <input type="checkbox"/>                                                           | <input type="checkbox"/>                                                            |

2. LISTEN AND TICK

|    |                                                                                    |    |                                                                                    |    |                                                                                    |    |                                                                                      |
|----|------------------------------------------------------------------------------------|----|------------------------------------------------------------------------------------|----|------------------------------------------------------------------------------------|----|--------------------------------------------------------------------------------------|
| 1. |  | 2. |  | 3. |  | 4. |  |
|    | <input type="checkbox"/> yes <input type="checkbox"/> no                           |    | <input type="checkbox"/> yes <input type="checkbox"/> no                           |    | <input type="checkbox"/> yes <input type="checkbox"/> no                           |    | <input type="checkbox"/> yes <input type="checkbox"/> no                             |

3. READ AND WRITE YES OR NO

HELLO! MY NAME IS PETER. I'M EIGHT YEARS OLD. MY LUCKY NUMBER IS SIX AND MY FAVOURITE COLOUR IS RED. I'VE GOT SHORT BROWN HAIR AND SMALL EYES. IN MY BACKPACK, I'VE GOT TEN PENCILS AND TWO RUBBERS. I HAVEN'T GOT A YELLOW RULER. I LIKE MY BIG FAMILY. I'VE GOT MY PARENTS, TWO SISTERS AND ONE BROTHER. I HAVEN'T GOT A PET. I'M VERY HAPPY.



- |                                    |       |
|------------------------------------|-------|
| 1- HE IS A BOY.                    | _____ |
| 2- HIS LUCKY NUMBER IS TEN.        | _____ |
| 3- HIS EYES ARE SMALL.             | _____ |
| 4- HE HAS GOT PENCILS AND RUBBERS. | _____ |
| 5- HIS FAMILY IS BIG.              | _____ |
| 6- HE HAS GOT ONE BROTHER.         | _____ |
| 7- HE HAS GOT A DOG.               | _____ |
| 8- HE IS SAD.                      | _____ |

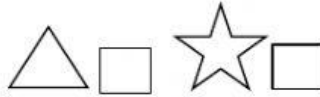


4. TICK THE CORRECT OPTION

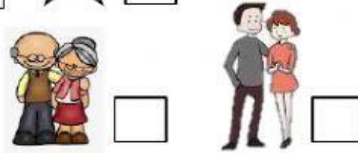
•SALLY HAS GOT A SMALL NOSE.



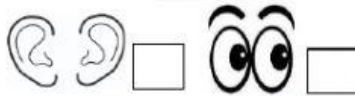
•IT'S A TRIANGLE.



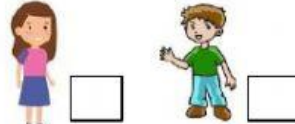
•THESE ARE MY GRANDPARENTS.



•THESE ARE MY EYES.



•WHO'S HE? MY BROTHER.



•I'VE GOT FOUR CHAIRS.



5. ANSWER

1) WHAT'S YOUR NAME? \_\_\_\_\_

2) HOW OLD ARE YOU? \_\_\_\_\_

3) WHAT'S YOUR FAVOURITE COLOUR? \_\_\_\_\_

4) HAVE YOU GOT A DOG? \_\_\_\_\_

5) WHAT'S THIS?  \_\_\_\_\_

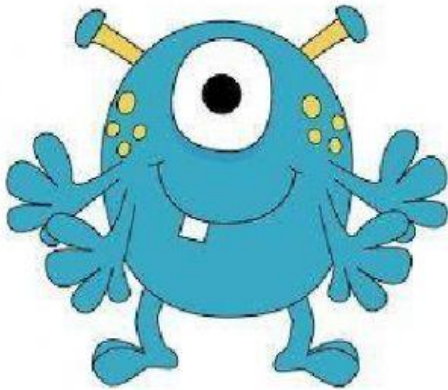
6) WHAT ARE THEY?  \_\_\_\_\_

7) HAVE YOU GOT SMALL EARS? \_\_\_\_\_

8) WHO IS SHE?  \_\_\_\_\_



6. LOOK AT THE MONSTER AND ANSWER



1. HAS HE GOT ONE EYE?

\_\_\_\_\_

2. HAS HE GOT TWO ARMS?

\_\_\_\_\_

3. HOW MANY FINGERS HAS HE GOT?

\_\_\_\_\_

4. HAS HE GOT FOUR TOES?

\_\_\_\_\_

7. WRITE ABOUT YOU

I'M..... I'M .....YEARS OLD. MY FAVOURITE COLOUR IS

..... MY FAVOURITE ANIMAL IS .....IN MY BAGPACK

I'VE GOT ..... AND

.....MY FAMILY IS ..... I'VE GOT .....

I'VE GOT .....HAIR AND .....EYES.

