

End-of-course Test Answer Sheet

B

American ENGLISH FILE 1

GRAMMAR

Exercise 1

- 1 an exciting game / a game exciting
- 2 study / to study
- 3 works / work
- 4 carefully / careful
- 5 have always / always have
- 6 some / any
- 7 in / on
- 8 getting up / get up
- 9 We go / Let's go
- 10 a lot / a lot of

Exercise 2

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____
- 11 _____
- 12 _____
- 13 _____
- 14 _____

Exercise 3

- | | |
|---------|----------|
| 1 _____ | 9 _____ |
| 2 _____ | 10 _____ |
| 3 _____ | 11 _____ |
| 4 _____ | 12 _____ |
| 5 _____ | 13 _____ |
| 6 _____ | 14 _____ |
| 7 _____ | 15 _____ |
| 8 _____ | 16 _____ |

40

VOCABULARY

Exercise 4

- 1 c _____
- 2 c _____
- 3 t _____
- 4 s _____
- 5 t _____
- 6 m _____
- 7 i _____
- 8 g _____
- 9 s _____
- 10 d _____
- 11 m _____
- 12 w _____
- 13 h _____
- 14 w _____

Exercise 5

- | | |
|---------|---------|
| 1 _____ | 4 _____ |
| 2 _____ | 5 _____ |
| 3 _____ | 6 _____ |

Exercise 6

- | | |
|--|---|
| 1 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> | 6 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |
| 2 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> | 7 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |
| 3 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> | 8 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |
| 4 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> | 9 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |
| 5 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> | 10 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |

Exercise 7

- | | |
|-----------|------------|
| 1 b _____ | 6 w _____ |
| 2 d _____ | 7 u _____ |
| 3 s _____ | 8 e _____ |
| 4 p _____ | 9 r _____ |
| 5 n _____ | 10 b _____ |

40

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PRONUNCIATION

Exercise 8

- | | |
|------------------|----------------|
| 1 cho colate | 6 un der stand |
| 2 to ma toes | 7 beau ti ful |
| 3 heal thy | 8 vege ta bles |
| 4 su per mar ket | 9 en gi neer |
| 5 o ppo site | 10 be hind |

Exercise 9

- | | | |
|---------|---------|----------|
| shoe | 1 _____ | 2 _____ |
| wall | 3 _____ | 4 _____ |
| open | 5 _____ | 6 _____ |
| red | 7 _____ | 8 _____ |
| teacher | 9 _____ | 10 _____ |

 20

GVP total 100

LISTENING

Exercise 1

- | | | | |
|---|----------------------------|----------------------------|----------------------------|
| 1 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 2 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 3 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 4 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 5 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |

Exercise 2

- | | | | | |
|---------|---------|---------|---------|---------|
| 1 _____ | 2 _____ | 3 _____ | 4 _____ | 5 _____ |
|---------|---------|---------|---------|---------|

 10

Listening and Speaking total 25

READING

Exercise 1

- | | | | |
|----|----------------------------|----------------------------|----------------------------|
| 1 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 2 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 3 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 4 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 5 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 6 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 7 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 8 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 9 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |
| 10 | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> |

Exercise 2

- | | |
|---|-------|
| 1 | _____ |
| 2 | _____ |
| 3 | _____ |
| 4 | _____ |
| 5 | _____ |

 15

Reading and Writing total 25