

8 Answer sheet

B

American
ENGLISH FILE 2

GRAMMAR

Exercise 1

- | | |
|-------------------------|-----------------------|
| 1 their / theirs | 4 yours / your |
| 2 my / mine | 5 hers / her |
| 3 his / hers | 6 Its / Their |

Exercise 2

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

Exercise 3

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____

☐ 20

VOCABULARY

Exercise 4

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

Exercise 5

- | | |
|---------|---------|
| 1 _____ | 5 _____ |
| 2 _____ | 6 _____ |
| 3 _____ | 7 _____ |
| 4 _____ | 8 _____ |

Exercise 6

- | | |
|-----------------------------|------------------------|
| 1 looks like / looks | 4 met / known |
| 2 wins / earns | 5 made / did |
| 3 wear / carry | 6 borrow / lend |

☐ 20

PRONUNCIATION

Exercise 7

- 1 de|ci|sion
- 2 ea|si|ly
- 3 con|di|tio|nal
- 4 re|ceive
- 5 whis|per

Exercise 8

could wood food woman
 football hour course computer
 put trousers young should

☐ 10GVP total ☐ 50

READING

Exercise 1

- | | |
|--|--|
| 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"/> | |

Exercise 2

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

☐ 15Reading and Writing total ☐ 25

LISTENING

Exercise 1

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

Exercise 2

- 1 _____ 2 _____ 3 _____ 4 _____ 5 _____

☐ 10Listening and Speaking total ☐ 25