

6 Answer sheet

American
ENGLISH FILE 2

GRAMMAR

Exercise 1

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

Exercise 2

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

Exercise 3

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

 20

VOCABULARY

Exercise 4

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

Exercise 5

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

Exercise 6

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

 20

PRONUNCIATION

Exercise 7

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

Exercise 8

- | | |
|-------------|-------------|
| 1 prac tice | 4 ha ppen |
| 2 pre fer | 5 com plain |
| 3 pro mise | |

 10
GVP 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"/> | 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

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 _____

 10
Listening and Speaking total 25