

4 Answer sheet

A

American
ENGLISH FILE 3

GRAMMAR

Exercise 1

- | | |
|---------|----------|
| 1 _____ | 6 _____ |
| 2 _____ | 7 _____ |
| 3 _____ | 8 _____ |
| 4 _____ | 9 _____ |
| 5 _____ | 10 _____ |

Exercise 2

- | | |
|---------|----------|
| 1 _____ | 6 _____ |
| 2 _____ | 7 _____ |
| 3 _____ | 8 _____ |
| 4 _____ | 9 _____ |
| 5 _____ | 10 _____ |

 20

VOCABULARY

Exercise 3

- | | |
|---------|----------|
| 1 _____ | 6 _____ |
| 2 _____ | 7 _____ |
| 3 _____ | 8 _____ |
| 4 _____ | 9 _____ |
| 5 _____ | 10 _____ |

Exercise 4

- | | |
|-------------|------------|
| 1 scr _____ | 6 b _____ |
| 2 i _____ | 7 t _____ |
| 3 v _____ | 8 b _____ |
| 4 m _____ | 9 r _____ |
| 5 sw _____ | 10 d _____ |

 20

PRONUNCIATION

Exercise 5

- 1 foreign
- 2 listen
- 3 doubt
- 4 island
- 5 whole

Exercise 6

- 1 Ja|pa|nese
- 2 di|sa|ppoin|ted
- 3 em|ba|rra|ssing
- 4 fru|stra|ting
- 5 dis|ho|nest

 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 _____ 2 _____ 3 _____ 4 _____ 5 _____

Exercise 2

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

 10Listening and Speaking total 25