NAME:

AVALIAÇÃO DE APRENDIZADO

DATE:



Time to check your progress!

I) FILL I	N THE GAPS L	JITH DO/ DOES, DON'T/ DOESN'T OR	DI
A) WH	AT TIME	YOU WAKE UP?	
	THEY LIK	KE GOING TO THE BEACH?	
c) WHAT	T HOURS	SHE WORK ON MONDAY?	
D) HOW	40 0	PRATICE YOUR ENGLISH?	
E)	_ YOU DO YO	OUR HOMEWORK?	
NO, I		*(PAST TENSE)*	
2) REARA	NGE THE SENTE	ENCES ACCORDING TO THE VERB "TO LI	KE"
4) (WAT	CH/ I/ TV/ LI	IKE)	
) (THEY	I/ LIKE /SING		
) (WE/R	EAD/BOOKS/	LIKE)	_
) (HE/	LIKES/ STORI	IES/ TELL)	_
E) (LIKE	/ I/ PLAY/ SO	OCCER)	20