

# Term 1 Practice Assessment

Please complete with your child and return by October 12th. Parent Initials: \_\_\_\_\_

## Part 1: Language Arts

Uppercase Letter Names: Put a check mark above each correct letter. They should know at least 10 letters and sounds, uppercase and lowercase.

M A S P T I N C O F  
K H D E L B Z G W X  
V R U J Q Y

Lowercase Letter Names: Put a check mark above each correct letter.  
Lowercase Letter Sounds: Put a check mark below each correct letter.

c f i b m o s a n  
e h l p r t d y x  
j z v u q w k g

### Sight Words

These are words they should memorize (not sound out). Allow 5 seconds per word. Put a check mark above each correct word.

I a can like the we see

Write your first name correctly. One capital letter and the rest lower case, form letters correctly from the top down, use proper spacing and neat formation.

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