**Level 0 (Literacy)**

**GCC Noncredit ESL Verbal Assessment**

**Fall 2012**

*These are examples of questions you are going to have on your verbal assessment at the end of the semester. Answer each question in a complete sentence (unless a short answer is specified).*

**1. Personal Information**

1. What is your first name? Please spell it.
2. What is your last name? Please spell it.
3. Where are you from?
4. What’s your complete address?
5. What’s your telephone number?
6. How old are you? (I am \_\_\_\_\_ years old.)
7. What are you doing now? (I am \_\_\_\_\_\_ing.)
8. Do you speak \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_? (Yes, I do./No, I don’t.)
9. Are you a teacher?

**2. Calendar/Time**

1. What day is today?
2. What day is tomorrow?
3. What month is it?
4. When is your birthday?
5. What is your date of birth?
6. What’s today’s date?
7. What time is it? (It’s \_\_\_\_\_\_.)

**3. Health**

a. What’s this? (Show picture and name body parts)

b. What’s the matter? (He/She/They have/has a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.) (Show picture)

c. Do you get check ups?

d. When your tooth hurts, where do you go?

e. Where do you go to exercise?

**4.** **Family**

1. Are you married?
2. Do you have children?
3. Who is she? (show picture)
4. Who is he? (show picture)
5. Who are they? (show picture)
6. How many brothers do you have? (I have…)
7. How many sisters do you have? (I have…)

**5. Money**

1. How much is a quarter?
2. Is five cents a nickel or a dime?
3. Are these coins or bills? (Show picture)
4. How much is this? (Show picture of coins and bills)
5. How much is the check for? (Show picture)
6. Who is the check to? (Show picture)

**6. School**

1. What days do you go to school?
2. Where are the restrooms?
3. Is there a computer in the classroom?
4. What’s the name of your teacher?
5. What do you need in class? (book, notebook, pencil, eraser, etc.)
6. Show me your registration card. What is your student I.D. number?
7. What time does class begin? (at\_\_\_)
8. What time does class end? (at\_\_\_)

**7. Food**

1. Say the name of a fruit.
2. Say the name of a vegetable.
3. Say the name of a meat.
4. What is your favorite food?
5. What vegetables do you like?
6. What do you like to drink?
7. What time do you eat breakfast? (at\_\_\_)
8. When do you eat lunch? (at\_\_\_)