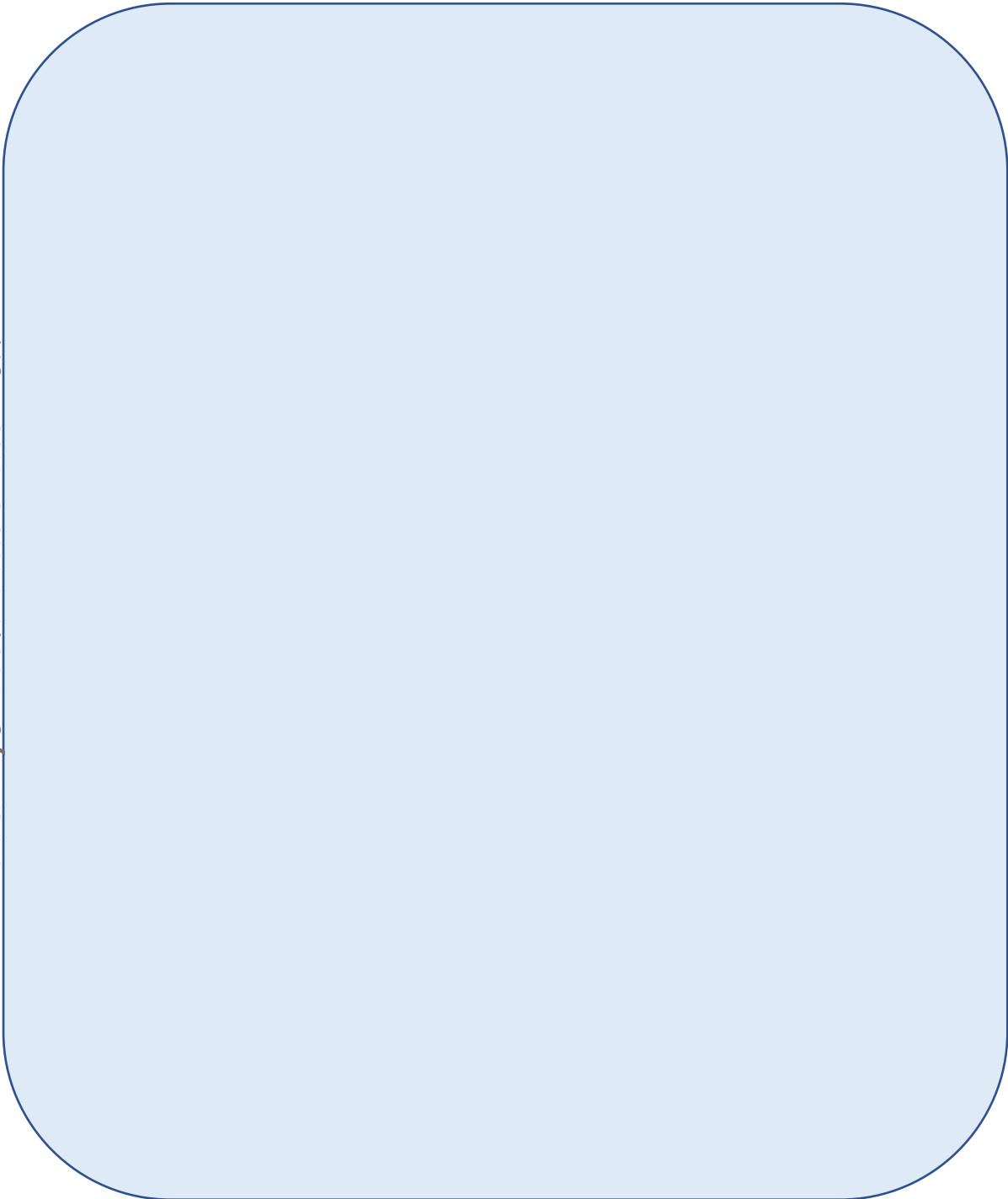


# My workbook

Theme Myself

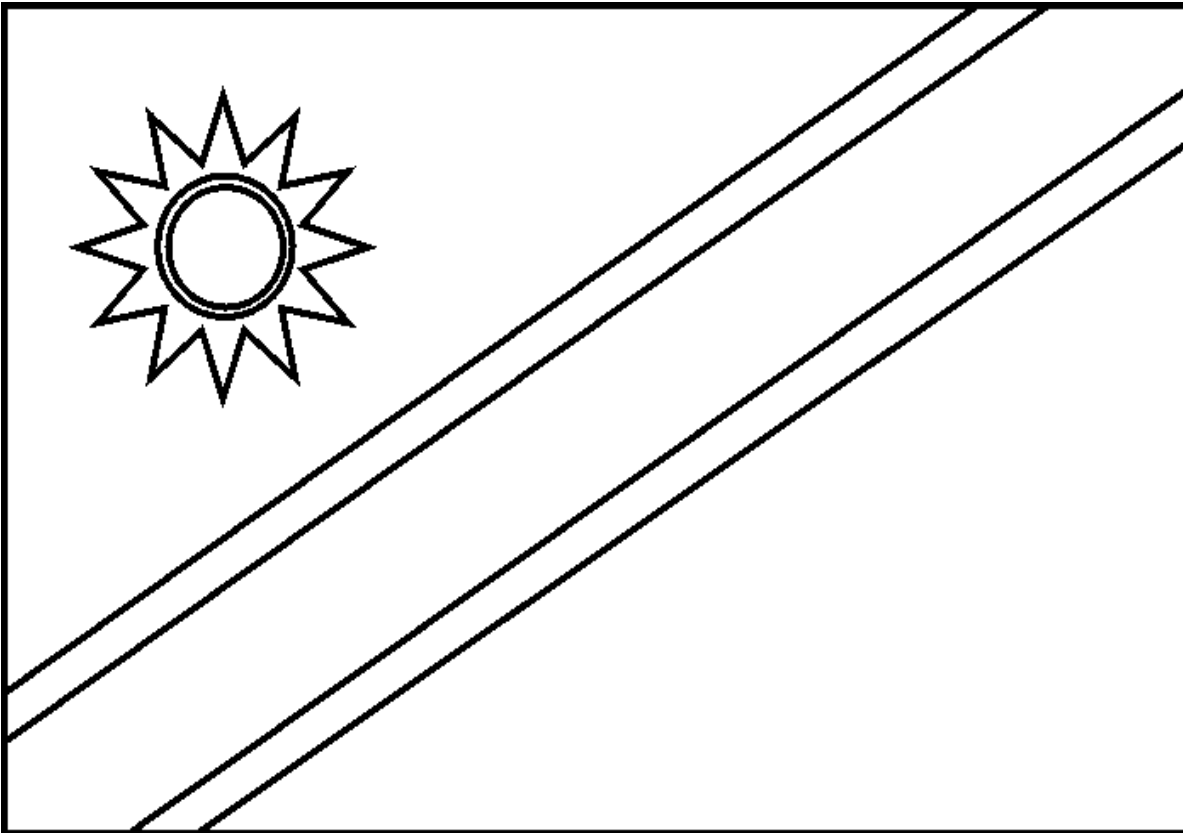
Draw yourself inside the box



Name: \_\_\_\_\_

Date: \_\_\_\_\_

# I'm a Namibian Child



## Myself

Activities: Draw your face inside the square (like in a ID card ☺); colour the Namibian flag, complete your information and colour your gender (boy or girl)- Parents please help

MY NAME: \_\_\_\_\_

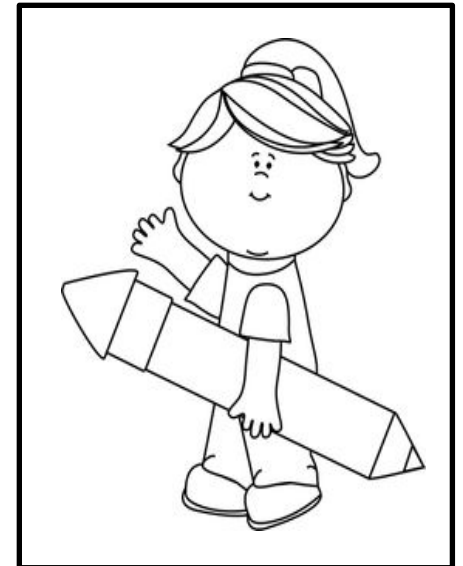
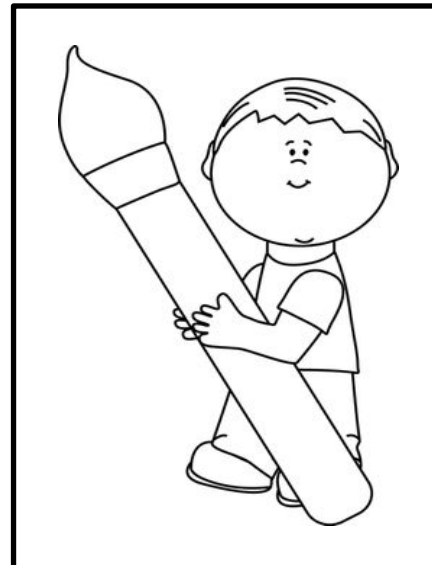
MY DATE OF BIRTH: \_\_\_\_\_

MY AGE: \_\_\_\_\_

MY PARENTS' NAMES: \_\_\_\_\_

MY SCHOOL: \_\_\_\_\_

MY DREAM: \_\_\_\_\_



**My Dream is...**

Activity: Draw what you want to be when you grow up

# Myself and My Family

Activity: draw yourself with your family members

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Child:** Cut each letter separately and paste them in the correct box making the correct word that matches to the picture.

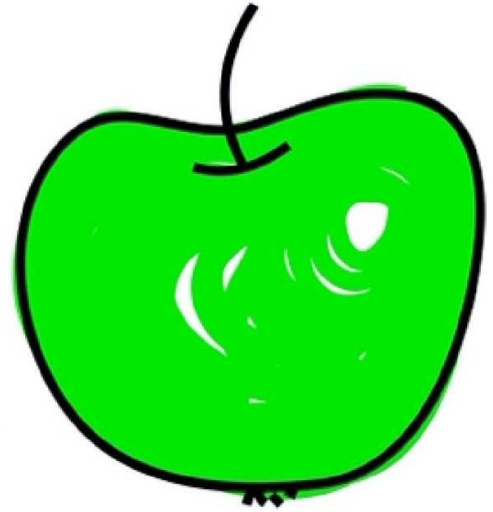
**Parents:** Make the sound of the first letter of each word and ask your child to indicate which letter of the alphabet has the same beginning sound. Once your child recognizes the beginning sound of the letter, ask him/her to choose a word with the same beginning sound and to imitate/represent that word through body language. All family can play the game, it will be fun! ☺



<u>f</u>	s	h	<u>e</u>	e	p	t	i
h	a	n	t	<u>c</u>	a	k	
c	<u>d</u>	u	a	<u>b</u>	n	a	a
	n	p	<u>a</u>	e	p	l	

A

a

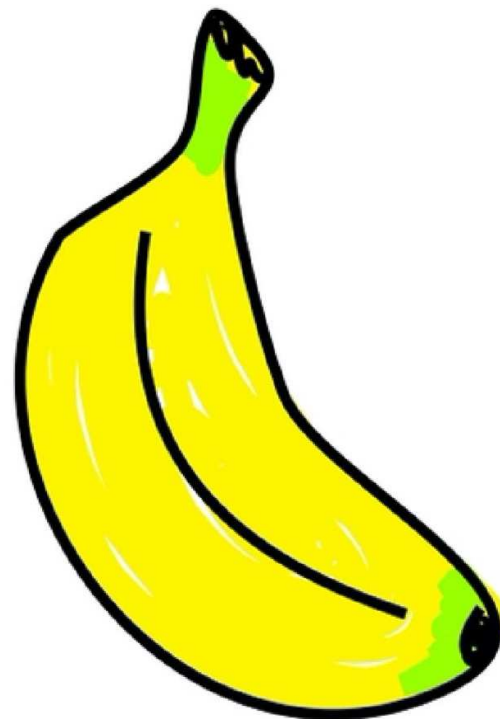


apple



B

b



banana

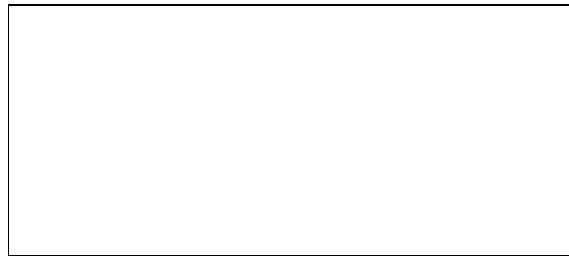


C

c



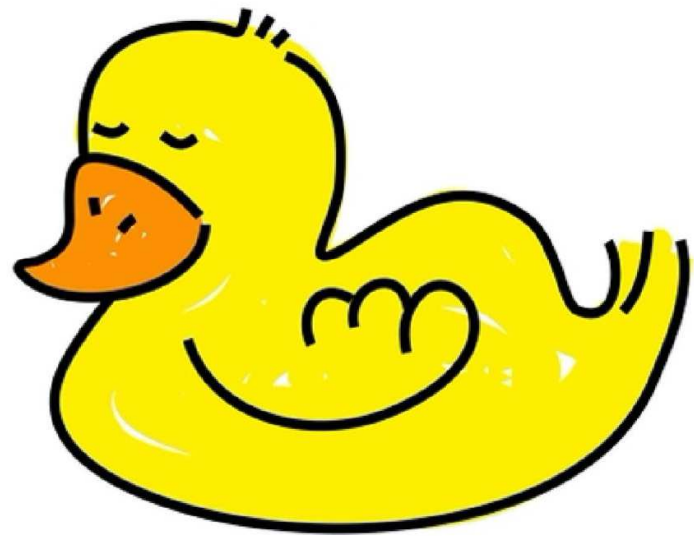
cat



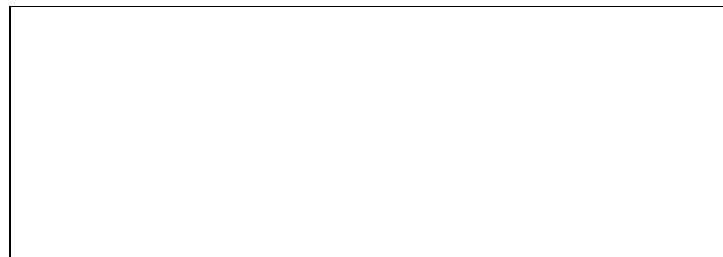


D

d

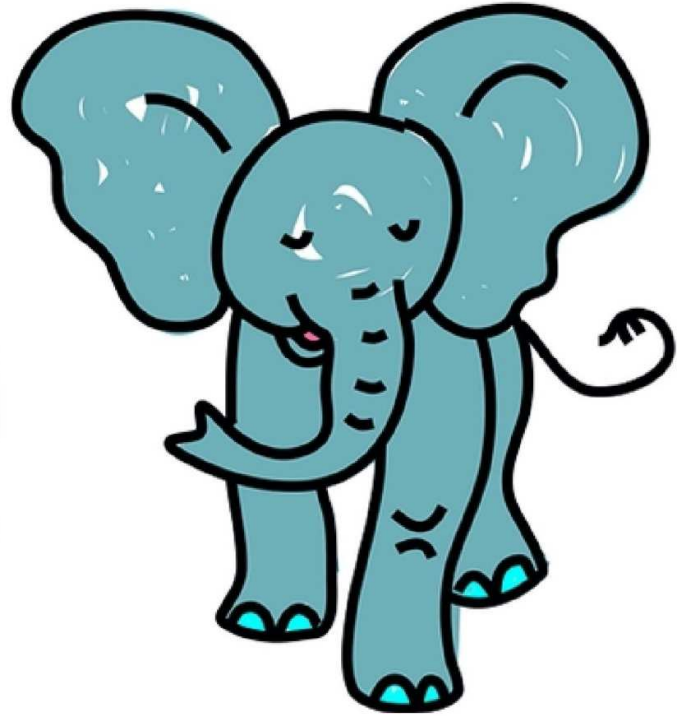


duck

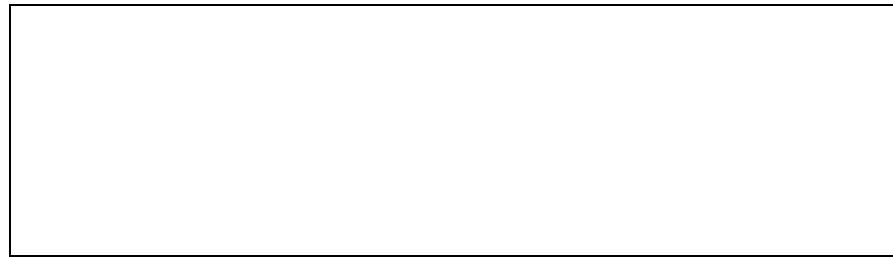


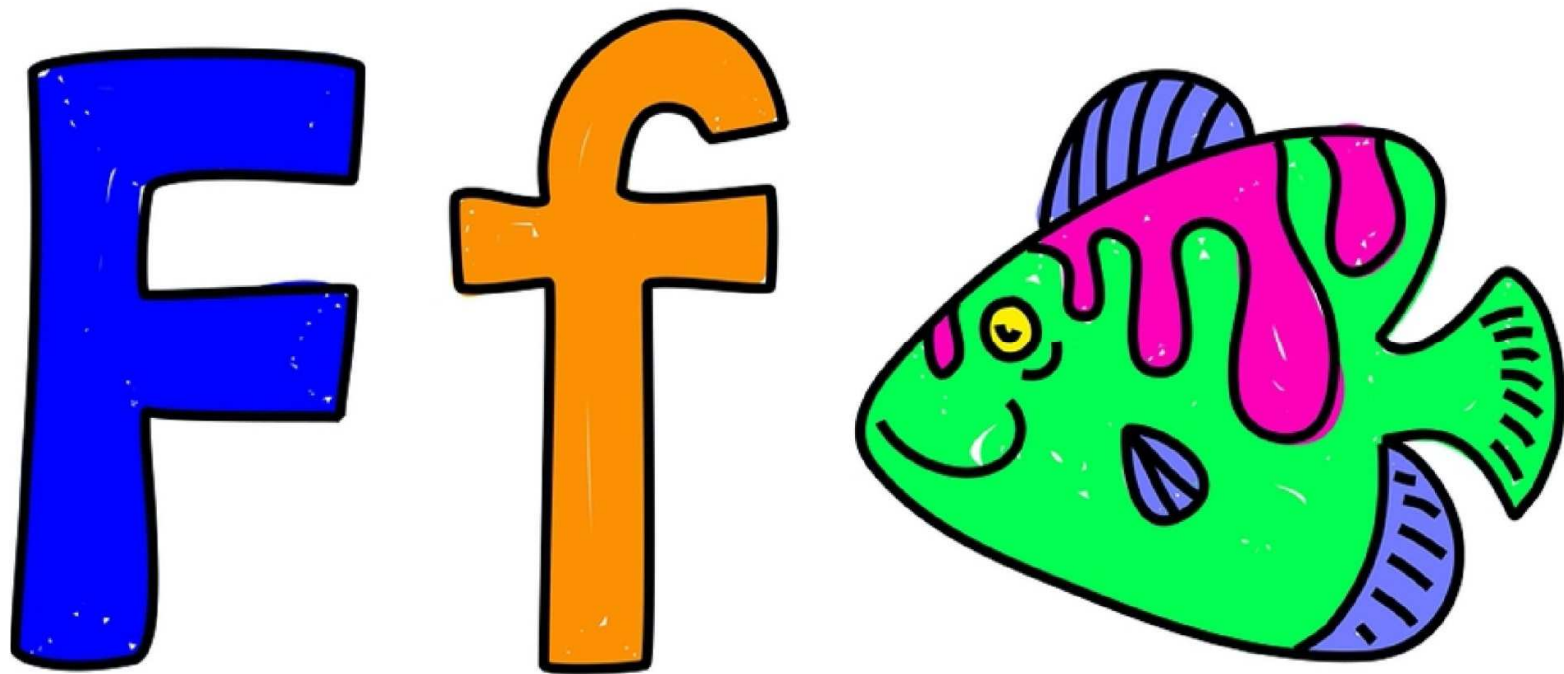
E

e



elephant





fish

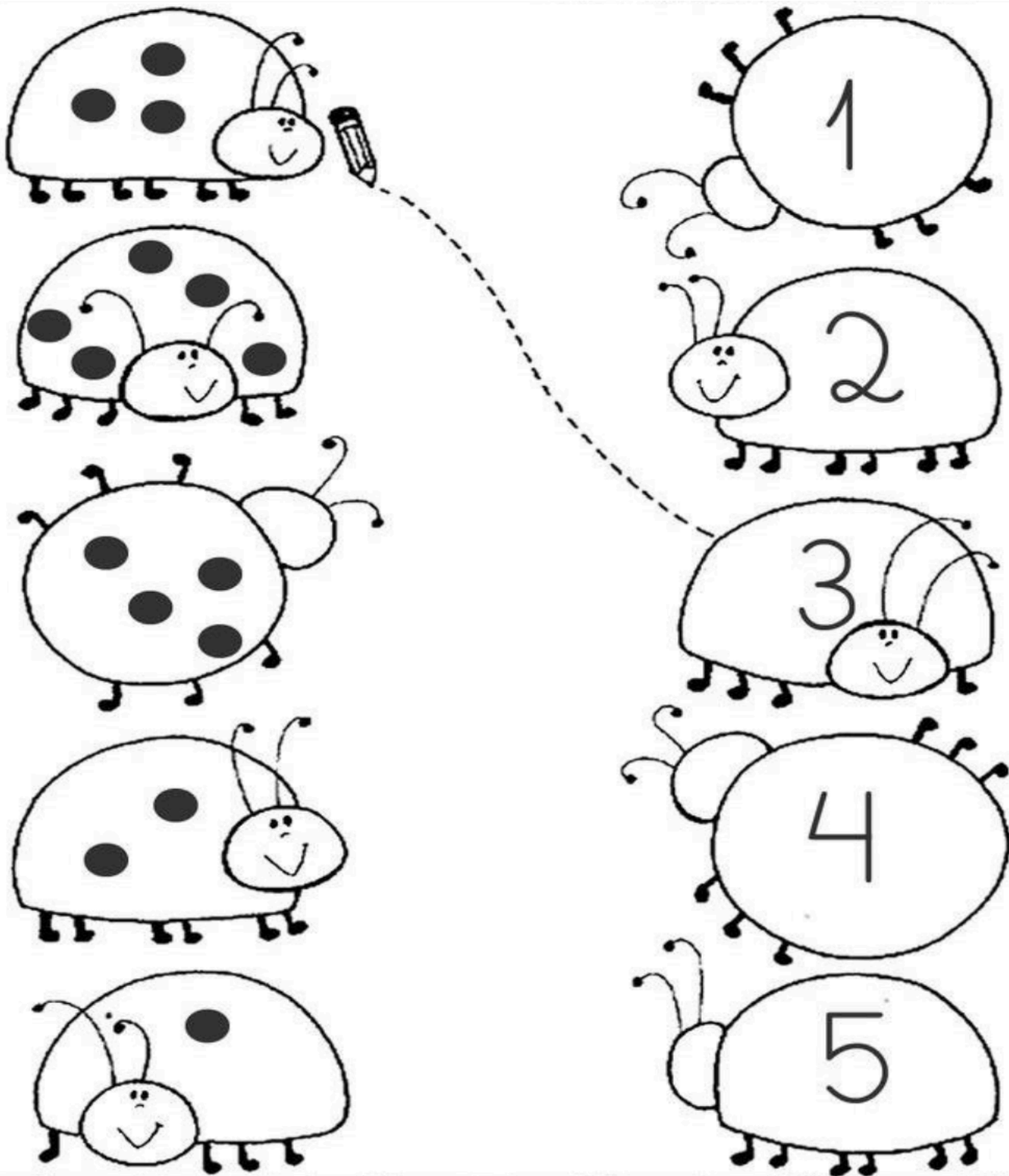


Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Child:** Help the Ladybugs find their family members by matching the Ladybugs. Look at the dots and the numbers . Color the Ladybugs, same number same color.

**Parents:** Help your child identifying the quantity and number and color the Lady bugs with the same number and same dots with the same color, e.g. Ladybug with number 3 and Ladybug with three dots, your child should color both with the same color.



# How do I feel today?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday



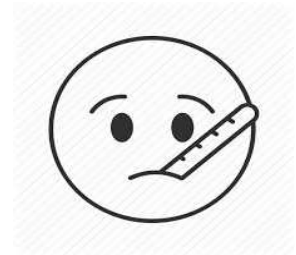
HAPPY



SAD



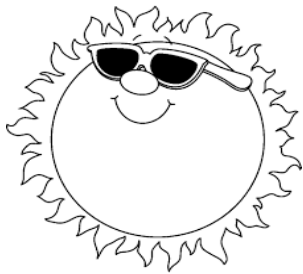
ANGRY



SICK

# My Weather Chart

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday



SUNNY



CLOUDY



WINDY



RAINY

Name: \_\_\_\_\_

Date: \_\_\_\_\_

## Activities Report

Did you like the activities? Colour the correct answer.



Yes



No

The activity I like the best was:

I learned...

**Parents:** Please support your child by writing the answers. Thank you.

## Parents' Appraisal Form

	Excellent	Good	Medium	Low	Bad
1. In general, how do you classify the activities?					
2. Creativity of the activities					
3. Parents /family engagement					
4. Did your child enjoy the activities? Which one she/he enjoyed most?					
5. What was your favourite activity?					
6. Give us suggestions you would like to see included in the next activities.					

Date \_\_\_/\_\_\_/\_\_\_

Thank you very much for your co-operation.