

Name \_\_\_\_\_ Date \_\_\_\_\_

**Testing Practice**  
**Letter Recognition**  
**Capital Letters**



Listen carefully as your teacher reads to you. Fill in the circle under the correct answer.

1.	<b>B</b>	<b>S</b>	<b>G</b>	<b>R</b>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2.	<b>L</b>	<b>A</b>	<b>V</b>	<b>C</b>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.	© abcteach.com			
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.	<b>E</b>	<b>W</b>	<b>N</b>	<b>I</b>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.	<b>K</b>	<b>Q</b>	<b>Z</b>	<b>H</b>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>