

Name: _____

😊 leicht ☐


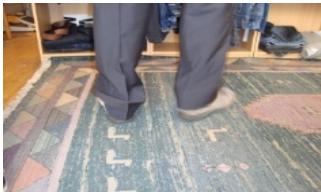
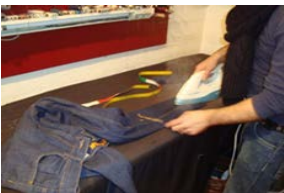



Datum: _____

☹️ schwer ☐

1.2 Welche Silben hören Sie?



1.09

1	 <p>mes</p> <input type="checkbox"/>	 <p>kür</p> <input type="checkbox"/>
2	 <p>bü</p> <input type="checkbox"/>	 <p>fal</p> <input type="checkbox"/>
3	 <p>Re</p> <input type="checkbox"/>	 <p>nä</p> <input type="checkbox"/>