Green Champ Review

Name ___________________________

Be sure to check out our Chabad Hebrew School photos on our website
www.chabadhebrewschool.us

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent's Signature _______________________________________________________

Area of difficulty ______________________________________________________

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent's Signature _______________________________ Day of week ________________________

Green Aleph

18
Green Champ Review

Name ___________________________

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How well did your child do?    Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________________________________

Area of difficulty _____________________________

How well did your child do?    Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ________________________

Green Aleph

19
Green Champ Review

Name ___________________________

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How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature __________________________________________________________________________

Area of difficulty __________________________________________________________________________

__________________________________________________________________________________________

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ________________________

Green Aleph

20
Aleph Champ Home Work
Chabad Hebrew School

Green Champ Review

Name ___________________________

1. לובַּהַ גְּשָּׁשָּׁת
2. רַיִּתָה חַמָּלָת
3. עֲשָׁנָה הָוָלָה
4. הָוָלָה עֶבֶּנָּי
5. לִיטָשָּׁה מַשָּׁתָּה
6. מַשָּׁתָּה מְרַחֶת
7. מְרַחֶת סֶפָּחִי
8. לֹבַּהַ חֵרָּדָה

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How well did your child do? Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________________________________

Area of difficulty ____________________________________

How well did your child do? Very well ________ Well _________ With difficulty ____________

Parent’s Signature ___________________________ Day of week ________________________

Green Aleph

21
Green Champ Review

Name ___________________________

How well did your child do?    Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________________________________

Area of difficulty _____________________________

********************************************************************************************************************

How well did your child do?    Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ________________________

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www.chabadhebrewschool.us

Green Aleph

22
Green Champ Review

Name ___________________________

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How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature ____________________________________________________________

Area of difficulty _____________________________________________________________

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature ___________________________________ Day of week _________________

Green Aleph

23
Green Champ Review

Name ___________________________

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www.chabadhebrewschool.us

How well did your child do?    Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________________________________

Area of difficulty ___________________________________________________________

How well did your child do?    Very well ________ Well _________ With difficulty ____________

Parent’s Signature ___________________________ Day of week ________________________

Green Aleph

24
Green Champ Review

Name ___________________________

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www.chabadhebrewschool.us

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature ____________________________________________________________

Area of difficulty _____________________________

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature _____________________________ Day of week ________________________

Green Aleph

25
Green Champ Review

Name ___________________________

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</table>

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How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature ________________________________________________

Area of difficulty __________________________________________________________________________________________

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ______________________

Green Aleph

26
Aleph Champ Home Work

Chabad Hebrew School

Green Champ Review

Name ___________________________

Be sure to check out our Chabad Hebrew School photos on our website www.chabadhebrewschool.us

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________________________________

Area of difficulty _____________________________

******************************************************************************

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ________________________

Green Aleph

27
Green Champ Review

Name ___________________________

Be sure to check out our Chabad Hebrew School photos on our website www.chabadhebrewschool.us

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature ________________________________________________________________

Area of difficulty _____________________________

How well did your child do?  Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ________________________

Green Aleph

28
Green Champ Review

Name ___________________________

Be sure to check out our Chabad Hebrew School photos on our website www.chabadhebrewschool.us

Green Aleph

How well did your child do? Very well ________ Well _________ With difficulty ____________

Parent's Signature _______________________________________________________

Area of difficulty _____________________________

********************************************************************************************************************

How well did your child do? Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ________________________

Green Aleph

29
Green Champ Review

Name ___________________________

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How well did your child do?      Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________________________________

Area of difficulty _____________________________

********************************************************************************************************************

How well did your child do?      Very well ________ Well _________ With difficulty ____________

Parent’s Signature ______________________ Day of week ______________________

Green Aleph

30
Green Champ Review

Name ___________________________

1. לָיְלוּ הַלֵּמָוד
2. מָגְזֵה שֶׁבֶט
3. בְּשֵׁרה נָכוֹן
4. מְעַרְרָה שְׁצוּל
5. הֶרָא לֵמָוד
6. הָיִיבָה מָבוֹל
7. יְרֵשָׁה מֶפְּדוֹ

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How well did your child do? Very well ______ Well ________ With difficulty ________

Parent’s Signature __________________________

Area of difficulty ____________________________

How well did your child do? Very well ______ Well ________ With difficulty ________

Parent’s Signature __________________________ Day of week ____________________

Green Aleph

31
Green Champ Review

Name ___________________________

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How well did your child do? Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________________________________

Area of difficulty _________________________________________________________

How well did your child do? Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ________________________

Green Aleph

32
Green Champ Review

Name ___________________________

How well did your child do?    Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________________________________

Area of difficulty _____________________________

********************************************************************************************************************

How well did your child do?    Very well ________ Well _________ With difficulty ____________

Parent’s Signature _______________________________ Day of week ________________________

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Green Aleph

33