

# English Proficiency Assessment

## OALCF Level 1 Assessment



## Literacy Link of Eastern Ontario

Pre-screening tool for the purpose of assessing an Ontario Adult Literacy Curriculum Framework level to learners wishing to improve their English skills.

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

DATE: \_\_\_\_\_



NOTES:

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# ENGLISH PROFICIENCY ASSESSMENT – LEVEL 1

✓ **E.1 Task:** Check the right answer(s).

I am in this class because:

- ☐ I want to get a job. 
- ☐ I want to go into a trade. 
- ☐ I want to read better. 
- ☐ I want to write better. 
- ☐ I want to be better at speaking English. 
- ☐ I want to finish high school. 



**D.1 Task:** Use a phone, Google Translate, or a translation app to look up each workplace word.

Write the word in your **first language**.

Work Word	My Language
Job	
Boss	
Work	
Name tag	
Phone	

**Bonus:** What app or tool did you use? \_\_\_\_\_

**A,1 Task:** Read the message below.



Hello. My name is Rosa.

I have a new job.

I wear a name tag.

My boss is nice.

I work at a store.

I use a phone to answer questions.



**B2.1 Task:** Answer the questions

1. Where is Rosa's job?

a) Hospital   b) Store   c) School   d) Restaurant

2. Who is nice?

a) Her cat   b) Her friend   c) Her boss   d) Her job

3. What does Rosa wear?

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4. Where does Rosa work?

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**B2.1 Task:** Fill in the blanks using your own information.

1. My name is \_\_\_\_\_.
2. I am from (country) \_\_\_\_\_.
3. I came to Canada in (year) \_\_\_\_\_.
4. I would like a job as a \_\_\_\_\_.

**A2.1 Task:** Look at this schedule.

Name	Monday	Tuesday	Wednesday
Rosa	9–1	9–1	Off
Omar	10–2	Off	10–2



**Answer the questions:**

1. What time does Rosa work on Monday?

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2. Who works on Wednesday?

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3. What day is Rosa off?

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**B1.1 Task:** Practice this short conversation with your **instructor**.

“Hello, I am new. What is your name?”

“My name is \_\_\_\_\_. I work here.”

Switch roles and say the lines again.



**C2.1 and B1.1 Task:** Listen to what is read to you

**Instructor reads aloud:**

“You start work tomorrow at 8 AM. You are done at 12 pm. Wear your name tag.”



**Task:** Answer the questions

1. What time do you start work? \_\_\_\_\_
2. What should you wear? \_\_\_\_\_
3. When are you done? \_\_\_\_\_
4. How many hours will you work? \_\_\_\_\_



**B3.1 Task:** Please finish this form.

Last Name: _____	Street Address: _____
First Name: _____	Town/City: _____
Middle Initial: _____	Province: _____
Birthdate: _____	Postal Code: _____
Phone number: _____ Email: _____	



Please show your instructor your work

Thank you.