

KV: _____

DATE : _____

Class : _____

Subject: EVS

Lesson: Our Neighbourhood

Name of the Student : _____

Match the following:

Post Office



Library



Hospital



Railway Station



Post Office



Grade: _____

Teacher Signature : _____



KV: _____

DATE : _____

Class : _____

Subject: EVS

Lesson: Our Neighbourhood

Name of the Student : _____

Match the following:

Doctor



Teacher



Policeman



Traffic Police



Teacher Signature : _____

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