

Name: \_\_\_\_\_

Date: \_\_\_\_\_

## GOOD CLASSROOM HABITS

Read the sentence. Pick a word from the box to fill in the blank.

**share      listen      raise      walk      clean**



I \_\_\_\_\_ when the teacher talks.



I \_\_\_\_\_ my toys with friends.



I \_\_\_\_\_ my hand to speak.



I help \_\_\_\_\_ up the room.



I \_\_\_\_\_ inside the school.