Phonics Scheme Sight Word Checklist

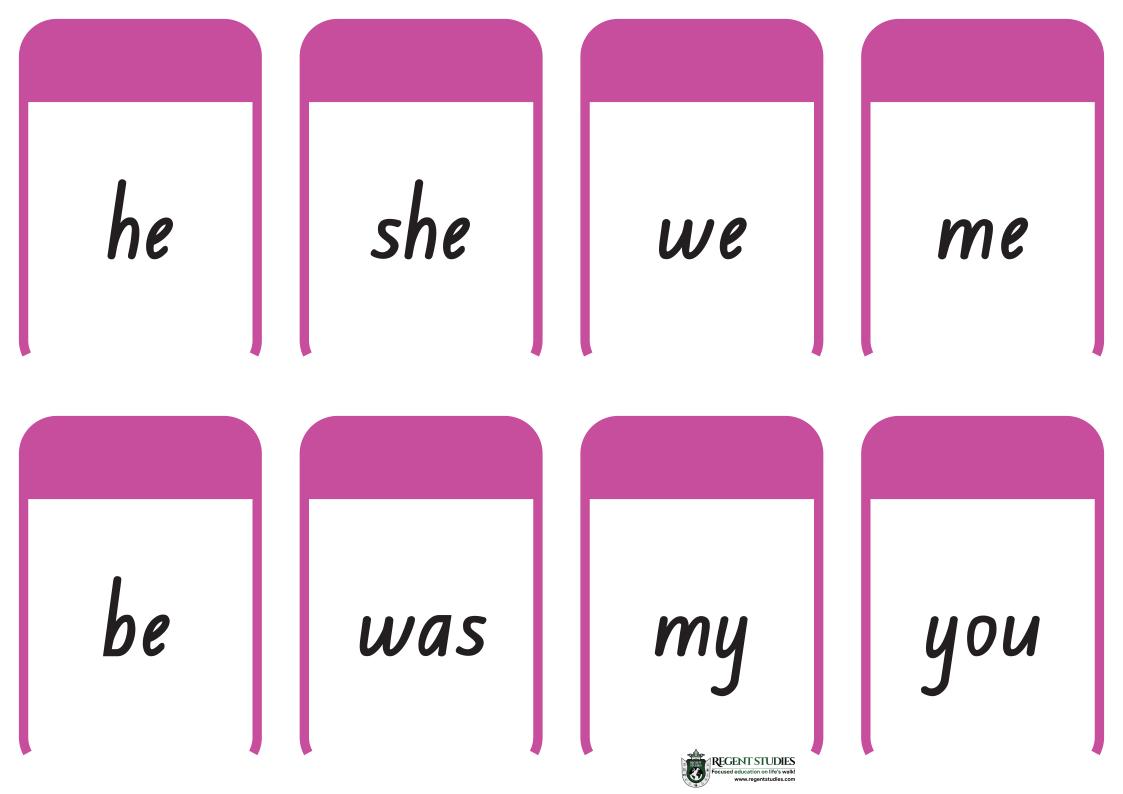


Name:	Age:	Weeks at school:

Room: Year: Teacher:

Date							
he							
she							
we							
me							
be							
was							
my							
you							
they							
here							
all							
are							





they here all are

