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| Turma: 6º ANO B | Nome Completo: GABARITO | Nº: |
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LINGUAGENS E CÓDIGOS: PORTUGUES, INGLÊS, ARTE E EDUCAÇÃO FÍSICA

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|----|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 1 | A | B | C | D | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2 | <input checked="" type="checkbox"/> | B | C | D | E | <input type="checkbox"/> |
| 3 | <input checked="" type="checkbox"/> | B | C | D | E | <input type="checkbox"/> |
| 4 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 7 | A | B | C | D | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8 | <input checked="" type="checkbox"/> | B | C | D | E | <input type="checkbox"/> |
| 9 | A | <input checked="" type="checkbox"/> | C | D | E | <input type="checkbox"/> |
| 10 | <input checked="" type="checkbox"/> | B | C | D | E | <input type="checkbox"/> |
| 11 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 12 | A | B | C | D | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13 | A | <input checked="" type="checkbox"/> | C | D | E | <input type="checkbox"/> |
| 14 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 15 | A | B | C | D | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 16 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 17 | A | B | C | <input checked="" type="checkbox"/> | E | <input type="checkbox"/> |
| 18 | A | <input checked="" type="checkbox"/> | C | D | E | <input type="checkbox"/> |
| 19 | A | B | C | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 20 | A | <input checked="" type="checkbox"/> | C | D | E | <input type="checkbox"/> |
| 21 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 22 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 23 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 24 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 25 | A | B | C | <input checked="" type="checkbox"/> | E | <input type="checkbox"/> |
| 26 | A | <input checked="" type="checkbox"/> | C | D | E | <input type="checkbox"/> |
| 27 | <input checked="" type="checkbox"/> | B | C | D | E | <input type="checkbox"/> |
| 28 | A | B | C | <input checked="" type="checkbox"/> | E | <input type="checkbox"/> |
| 29 | A | B | C | <input checked="" type="checkbox"/> | E | <input type="checkbox"/> |
| 30 | A | <input checked="" type="checkbox"/> | C | D | E | <input type="checkbox"/> |

TOTAL DE ACERTOS:

NOTA / MÉDIA:

Assinatura do(a) aluno(a)



| | | |
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| 16 | A | B | <input checked="" type="checkbox"/> | D | E | <input type="checkbox"/> |
| 17 | A | B | C | <input checked="" type="checkbox"/> | E | <input type="checkbox"/> |
| 18 | A | <input checked="" type="checkbox"/> | C | D | E | <input type="checkbox"/> |
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| 25 | A | B | C | <input checked="" type="checkbox"/> | E | <input type="checkbox"/> |
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| 29 | A | B | C | <input checked="" type="checkbox"/> | E | <input type="checkbox"/> |
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NOTA / MÉDIA:

Assinatura do(a) aluno(a)