



Chabad of Scottsdale Hebrew School

Yellow Champ Review

Name _____

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent’s Signature _____ Day of week _____

Area of difficulty _____

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent’s Signature _____ Day of week _____

Aleph Champ Home Work

Chabad of Scottsdale Hebrew School

Yellow Champ Review

Name _____

א	ב	ג	ד	ה		1
ו	ז	ח	ט	י	כ	2
ל	מ	נ	ס	ז	ס	3
ע	פ	פ	ק	צ	מ	4
ק	ר	ש	ש	ת	ת	5

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ו	ז	ח	ט	י	יא	1
כ	כא	כב	כג	כד	כה	2
כו	כז	כח	כט	ל	לא	3
לב	לג	לד	לה	לו	לז	4
לח	לט	מ	מא	מב	מג	5
מד	מה	מו	מז	מח	מט	6
נ	נא	נב	נג	נד	נה	7

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שָׁל	חַן	אָה	פֶּן	1
כֵּן	גַּם	שָׁל	שָׁם	2
גַּג	אֶת	זֶה	עַל	3
מָה	קָם	לֵב	בֶּן	4
חַג	פֶּה	שָׁם	דָּג	5
שָׁם	תֵּן	מִי	אֵל	6
מָה	חָם	זֶה	אֶת	7

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תַּרְחַם בְּלִיאַ	1
שֵׁט וְדַפְנֵי עֵשׂ	2
יִגְכַּח חֶבֶז אֶל	3
שִׁזְלָע תְּכַחֵע	4
יִגְזַר קַרְפֵּס	5
רַב־כַּתְדָּה נִקְו	6
פִּגְדֵמ בְּלִיאַ	7

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- | | | | |
|--------|---------|---------|---|
| אָמֶת | נֶאֱחָה | שָׁכֵן | 1 |
| בְּרִד | מִלֵּד | דֶּרֶד | 2 |
| וְרִד | שִׁבַּע | שִׁבַּת | 3 |
| וְנִר | כֶּסֶף | אֲשֶׁר | 4 |
| שָׁלֵל | פֶּרֶק | לָכֵן | 5 |
| בֵּין | חֶרֶב | לֵבָב | 6 |
| יָאֵר | שָׁמֵשׁ | עֵשָׂן | 7 |
| אֶלֶף | עֵיף | פֶּסֶח | 8 |

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הַטָּא	הַזָּה	עֵיף	1
אֶהָד	קֶפֶה	פֶּרַח	2
נִמְמָה	שָׂוָה	חֶפֶץ	3
מֵלֶךְ	בֶּרֶךְ	אֶתֶם	4
סֵפֶר	רַחֵל	אֶהֵב	5
שִׁנָּה	גִּפּוֹן	מֵצָה	6
אֶמֶן	שֶׁמֶשׁ	לָמַד	7
אֶמַּת	כֶּסֶף	זָכַר	8

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בַּמָּה	בִּגְזַן	פָּרַק	1
הֶרַף	נָאָה	שָׂרָה	2
אֶלֶף	הָהֵם	טָהָר	3
דָּיָן	שִׁלְדָּ	חֵלָה	4
בָּנִים	שָׁנָה	גִּשְׁם	5
חָרַב	יָרַד	דָּקָה	6
חֵלָה	הִזָּה	חֲדָשׁ	7
הָעֵץ	נִוָּה	שָׁבַע	8

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לְשֶׁבֶת	הַשָּׂדֶה	1
שֵׁשׁ	אֵיכָה	2
נַעֲשֶׂה	מִהֲרַת	3
הַכֶּשֶׁר	הַגֶּפֶן	4
בִּסְפֹר	יַעֲלֶה	5
הָעֶפֶר	מִחֲזָה	6
בֵּיתְךָ	מֵאֵלֶּה	7
כִּלְבַּת	בְּרִגַע	8

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Sh'va :

שׁוּׁ שׂוּׁ :
שׁוּׁ שׂוּׁ :

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א	ב	ג	ד	ה	1
ו	ז	ח	ט	י	2
כ	ל	מ	נ	ס	3
ע	פ	צ	ק	ר	4
ש	ת	י	כ	ל	5

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ש	ח	ז	ט	ו	ס	1
ר	ק	צ	מ	ל	נ	2
י	ב	ט	ה	ג	מ	3
ה	ז	ש	א	א	נ	4
מ	ל	ט	ש	ו	ר	5
ו	ל	ה	א	א	ט	6
ד	ז	ה	ס	ע	ו	7

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- 1 כִּפּוּר זֵאֵב וְאֵף
- 2 טִבּוּר גִּדּוּל בְּנֵי
- 3 לִבּוֹן מַעֵט וְאֵת
- 4 שִׁמְעֵה מְתִי רִפְאָה
- 5 לְמִדּוּר שִׁבְעָה דְבַשׁ
- 6 בְּהִיר פֶּאֶר וְעִץ
- 7 גִּבּוֹר יָמֵי קְהָל
- 8 מִשְׁלַל וְאֵל כִּבּוֹן

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- | | | | |
|----------|---------|----------|---|
| פְּרַח | שִׁלַּח | וְרָם | 1 |
| זָבַח | לִבָּן | רֵאָה | 2 |
| נִדְּוִי | וְאֵת | דְּבַר | 3 |
| נִטְּחָה | וְשָׁל | בְּאֵר | 4 |
| רֵאָה | וְזָה | דְּבַר | 5 |
| מִצָּא | לִבֵּד | שִׁלַּח | 6 |
| וְהֵם | כְּמִי | שָׁמַע | 7 |
| וְכֵן | שִׁאֵר | פְּנֵיהָ | 8 |

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פְּרַח	דְּבַר	זְמַן	1
זְבַח	קִפְּהַ	וְרָם	2
עֵדָר	שְׂוֵה	מִזֹּל	3
פְּתַח	וְזַה	שְׂמַע	4
מְחַר	לְכֹן	דְּבַשׁ	5
לְזֹן	בְּאֵר	בְּטַח	6
רְדָף	כִּלְהַ	חֲמִיץ	7
שְׂמַא	חֲמָה	וְכֹן	8

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וּם	קִר	שִׁז	נִמ	1
שִׁל	עִמ	דִב	לִע	2
דִמ	פִג	גִט	פִר	3
וּנ	בִל	רִב	דִב	4
רִג	יִד	בִל	דִו	5
יִג	עִש	זִל	נִת	6
וּם	קִר	שִׁל	עִמ	7

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יְגַעַה	גְּמַרָּה	1
רַגְלָהּ	חַמְלָהּ	2
אֲנִישִׁי	נִתְנָהּ	3
קִרְאָהּ	שָׁמְעָהּ	4
זִמְרָהּ	זִלְמָן	5
עֲשִׂתָּהּ	הִבְדִּיל	6
פְּקִדָּהּ	אֶתְכֶם	7
זִרְחָהּ	אֲשִׁירִי	8

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אָמַרְתָּ	עֲצַמְךָ	1
דַּבַּרְתָּ	גַּמְרָה	2
אֶרְחֵץ	רַקְדָּה	3
גַּמְלָא	שָׂמְעָה	4
שִׁמְתֶם	חֲדוּדָה	5
אֲנִשִּׁי	שִׁלְךָ	6
גַּחְנָה	אֲשֶׁרִי	7
פָּרַשָׁה	צַדִּיקָה	8

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בְּטַח לְבָבוֹ	1
חֲדוּת מְהִירָה	2
הַדְּבִישׁ וְאָהֵב	3
מְבַרֵךְ לְבַבְךָ	4
אֲמַרְהָ בְּיָדְךָ	5
יְהִל יִזְמַר	6
מִדְּחַס וְהָסֵר	7
רִשְׁעָה יִתְטֵא	8

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אֲשֶׁרִי רְאָה	1
וְהִזָּה עֲדָקָה	2
שֶׁתִּהְיֶה הַמֶּלֶךְ	3
וְהָאֵשׁ שָׁמְעָה	4
נִקְבִּיז זָרְחָה	5
פִּקְדָה וְאֵת	6
קִרְאָה הַלְכָה	7
עֲשִׂתָה דְבַר	8

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כַּתְּבָה לְבַד	1
טַמִּי חַמְלָה	2
אֶתְכֶם לְלַמֵּד	3
דַּבְרָה שִׁלְךָ	4
נִקְדָה פִּתְה	5
עֲבֹרָה שִׁאֵר	6
נֹאֵה חֲגֵרָה	7
שִׁלְךָ קִרְאָה	8

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How well did your child do? Very well _____ Well _____ With difficulty _____

Parent's Signature _____ Day of week _____

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א	ב	ב	ג	ד	ה	1
ו	ז	ח	ט	י	כ	2
ך	ל	מ	ם	נ	ן	3
ע	פ	פ	ף	צ	ץ	4
ק	ר	ש	ש	ת	ת	5

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פ	ו	מ	ק	א	נ	1
י	ע	ג	ט	ש	צ	2
ז	ת	ל	ר	ה	ד	3
פ	נ	ה	ב	ש	ס	4
ל	ר	ה	ת	נ	א	5
ז	ת	ל	ו	מ	ק	6
ם	ץ	ף	ד	ז	ם	7

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כַּפֵּ	לֵט	נִגְ	בֵּשׁ	1
וּשׁ	בַּח	זִמְ	דִּכ	2
עֵצִ	יִפֵּ	חֶף	קֹז	3
סִדֵּ	נָם	עִמֵּ	בַּה	4
שֵׁן	דֵּל	חִזֵּ	אֵר	5
רִזֵּ	חֲנֵ	וּלֵ	רִדֵּ	6
זִמְ	דִּכ	לֵט	נִגְ	7

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כּוּט	הוּן	דוּד	1
חול	זום	עוף	2
כּוּד	קול	פּוּג	3
בוך	עוד	מוש	4
נוז	שוב	פּוּן	5
רום	אוף	יום	6
תול	צוך	תוד	7
בוט	סוף	קוץ	8

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עֲמוּ	חֹף	טוֹב	1
זְכוֹר	מִנְשָׂה	אוֹת	2
מִהֵר	חִרְף	וְלֹא	3
דוּד	אֶפֶן	עוֹד	4
סוּד	חִשָּׁךְ	תוֹךְ	5
לוֹט	שָׁמַר	וְלֹא	6
בִּרְא	יוֹם	נֶצַר	7
זֹאת	שָׁלוּ	סוּף	8

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וְלֹא	עָפָר	סוּד	1
חֹרֶף	תּוֹךְ	עִמּוֹךְ	2
יִצֵר	יָדַע	אֶהָד	3
קָמָה	יוֹם	אֵינְ	4
נִיָּה	בְּרֵא	בְּשָׂר	5
חוֹף	שִׁלְךָ	סוֹף	6
זְכָר	עִמּוֹ	לֵאָה	7
רַבָּה	אוֹת	הָעַם	8

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- | | | | |
|---------|---------|-----------|---|
| עֵמֶךָ | יֵשׁוּם | גִּזְלֵךְ | 1 |
| קִדְשׁ | כִּבְשׁ | חֲשֵׁךְ | 2 |
| שָׁמֹר | חֶסֶר | וְלֹא | 3 |
| נִצֵּר | קָרָא | לוֹט | 4 |
| מִמֶּשׁ | שֶׁלְךָ | אָדָם | 5 |
| קָטָן | מִשָּׂה | זֹאת | 6 |
| מִהָר | זָכַר | כָּבֵד | 7 |
| דוּד | אֶפֶן | עוֹד | 8 |

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מְעוֹז בּוֹנָה	1
אוֹפָה כְּבוֹד	2
מְלוֹן בְּתוֹךְ	3
חֶסֶדוֹ אֲדוּם	4
תְּהִמַּת שְׁשׁוֹן	5
שְׁלוֹם זוֹכֵר	6
מְפֹאֵר תּוֹדָה	7
קִרְחוֹ קוֹרָא	8

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent's Signature _____ Day of week _____

Area of difficulty _____

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent's Signature _____ Day of week _____

Yellow Aleph

Aleph Champ Home Work

Chabad of Scottsdale Hebrew School

Yellow Champ Review

Name _____

- | | |
|------------------|---|
| אָמַרְהָ דוֹדָה | 1 |
| אָבוֹת קָרוֹב | 2 |
| לְדוֹר כָּבוֹד | 3 |
| סוֹפוֹ לְהֵדֵם | 4 |
| עוֹלָם מְבֹרָךְ | 5 |
| יֵאמַר קוֹרֵא | 6 |
| הָעֵשָׂה הוֹדֵךְ | 7 |
| מוֹשֵׁב שֹׁמֵר | 8 |

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent's Signature _____ Day of week _____

Area of difficulty _____

How well did your child do? Very well _____ Well _____ With difficulty _____

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עֲדָקָה בַּסּוֹף 1

אֲשֶׁרֵי כְבוֹד 2

לְשַׁבַּת הַיּוֹדוּ 3

קִבְּצוֹן דְּרוֹם 4

סוֹפוֹ הַשְּׂדֵה 5

שְׁלוֹם שְׁתֵּיהֶן 6

מִהֶרֶת וְעוֹף 7

הַמֶּלֶךְ לְדוֹר 8

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent's Signature _____ Day of week _____

Area of difficulty _____

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent's Signature _____ Day of week _____

Yellow Aleph

Aleph Champ Home Work

Chabad of Scottsdale Hebrew School

Yellow Champ Review

Name _____

Prepare to pass

- | | | | |
|----------|-----------|----------|---|
| מוֹשֵׁב | שֹׁמֵר | כָּבוֹד | 1 |
| יַעֲקֹב | נוֹתֵן | אֶשְׂרֵי | 2 |
| זוֹעֵם | קָרוֹב | חֶסֶדּוֹ | 3 |
| בוֹרֵא | וְעוֹף | לְדוֹר | 4 |
| קִמְצָן | הַשֹּׁמֵר | וְעוֹף | 5 |
| יַעֲשֶׂה | צָחוֹק | שָׁלוֹם | 6 |
| בַּסּוֹף | הוֹדוּ | מִהֶרֶת | 7 |

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent's Signature _____ Day of week _____

Area of difficulty _____

How well did your child do? Very well _____ Well _____ With difficulty _____

Parent's Signature _____ Day of week _____