

Aleph Champ Home Work

Chabad of Scottsdale Hebrew School

White 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

White Champ Review

Name _____

א	א	א	א	א	א	.1
א	א	א	א	א	א	.2
א	א	א	א	א	א	.3
א	א	א	א	א	א	.4
א	א	א	א	א	א	.5
א	א	א	א	א	א	.6

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

White Champ Review

Name _____

ב ב ב ב ב ב .1

א א.ב ב.ב א.ב א .2

א א.ב ב א.ב א.ב ב .3

ב א.ב א.ב ב א.ב ב .4

א.ב א.ב א.ב ב א א.ב .5

א א.ב ב א.ב א.ב א.ב .6

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

White Champ Review

Name _____

ג ג ג ג ג ג ג .1

א ג ג ב ב א .2

ג ב ב א ב ג .3

ב ב א ג ג ב .4

ג ב ב ג א ב .5

א ב ב ג ב ג .6

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

White Champ Review

Name _____

ד	ד	ד	ד	ד	ד	.1
א	ד	ג	ב	ב	א	.2
ד	ב	א	ג	ב	ד	.3
ד	ב	ד	א	ד	ב	.4
ג	ב	ד	ג	א	ד	.5
א	ב	ב	ד	ד	ג	.6

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

White Champ Review

Name _____

ה ה ה ה ה ה .1

ה ד ג ב פ א .2

ה ד ב ה ג ה .3

ב ה ד ה פ א .4

ה ב ד ג ה ד .5

ד ה ה ד ד ה .6

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

White Champ Review

Name _____

ו ו ו ו ו ו ו ו .1

ו ה ד ג ב ו ב .2

ה ג ו ו ב ו ב .3

ו א ו ה ד ו ב .4

ד ה ג ו ב ה ו .5

ג ו ה ו ה ו ד .6

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

White Champ Review

Name _____

ז ז ז ז ז ז ז ז .1

ז ב ג ד ה ו ז .2

ה ז ד ז ו ג ז .3

ז ו ז ד ה ז א .4

ב ז ה ז ג ו ז .5

ז ד ז ו ב ז ה .6

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

White Champ Review

Name _____

ח ח ח ח ח ח .1

ז ג ד ה ו ז ח .2

ה ז ד ו ה ח ז .3

ח ד ה ג א ח .4

ז ח ה ג ו ח ז .5

ו ב ד ח ח ה .6

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

White Champ Review

Name _____

ט ט ט ט ט ט .1

ט ה ז ו ה ד ג .2

ט ג ו ה ד ט ז .3

ה א ט ה ד ט .4

ד ה ט ו פ ג ז .5

ט ה ט ב ט ב .6

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

White Champ Review

Name _____

י י י י י י י י .1

י ט ח ז ו ה ד .2

ו י ט ב י ח א .3

ט ח י ג ה ד י .4

י ח ט ו ב ג ז .5

י ב ו ד י ט י .6

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

White Champ Review

Name _____

כ כ כ כ כ כ .1

כ י ט ח ז ו ה .2

כ י ט כ ב י ח ג .3

כ כ י כ ה ד י .4

כ ח ט ו ב כ ז .5

כ כ כ ב כ ו י .6

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

White Champ Review

Name _____

כ כ כ כ כ כ 1

ו ז ח ט י כ פ 2

ח י ב פ כ ב ו 3

ד ה ט י פ כ ט 4

ז פ ט א ט ח ג 5

כ ב פ ב כ ב י 6

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

White Champ Review

Name _____

ד ד ד ד ד ד ד .1

ד ה ט י פ נ ד .2

ב ד ה ז נ ד ט .3

ח ד ט ו ד ה ו .4

ד י א ט ב פ ד .5

ד ד נ ב פ ב ג .6

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

White Champ Review

Name _____

ל	ל	ל	ל	ל	ל	ל	.1
ח	ט	י	כ	ך	ל		.2
כ	ב	ל	ך	ח	כ	י	.3
ך	ט	ל	א	י	ז	ל	.4
ה	ל	כ	ך	ג	ל	ח	.5
ו	ל	כ	ב	ד	ך	ל	.6

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

White Champ Review

Name _____

מ מ מ מ מ מ .1

מ ל ד כ פ י ט .2

ל ז מ ד ל ט מ .3

ט מ א ה מ ב ו .4

מ ח ל ג ד כ ב .5

ל ד מ פ ל מ .6

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

White Champ Review

Name _____

ם ם ם ם ם ם .1

ם מ ל ד כ פ י .2

ם מ ל ם מ ם ד .3

ם ו ם א ד ח מ .4

ם ה ט ד ג ט ם .5

ם ו מ ם ז ם .6

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

White Champ Review

Name _____

- .1 א א א א א א א א
- .2 פ כ ד ל מ ם נ
- .3 ג ג ב ד ט ם נ
- .4 ם נ ו א נ מ ם
- .5 ה ח ם ד נ ב ל
- .6 ג ג נ ו ז ם מ נ

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

White Champ Review

Name _____

ו ו ו ו ו ו ו ו ו .1

ז נ ם ם ם ם ם ם ם .2

נ ן ן ן ן ן ן ן ן ן .3

ה נ ו ן ד ג פ ז .4

ל ב ב נ ד ם ן ה .5

ז ן ו נ ם ד ד ן .6

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

White Champ Review

Name _____

Prepare to pass

כ ב א ט מ ד י 1

י פ ב ד ז ו ז ל 2

ג נ ו ז ם מ ו נ 3

ד נ ל מ ט ח ה 4

פ כ ד מ ם נ ז 5

ד ה א ח ט י ל 6

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 _____