

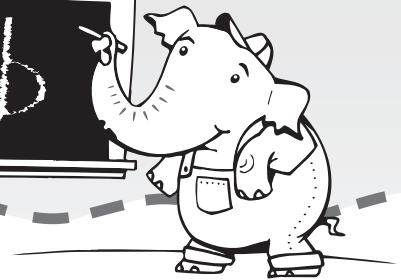
Time Practice

Name _____

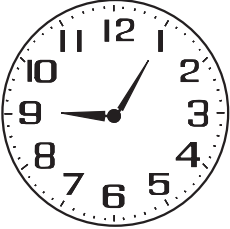
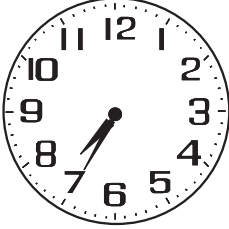
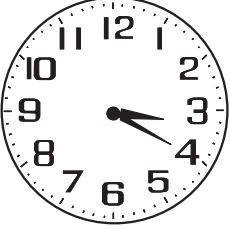
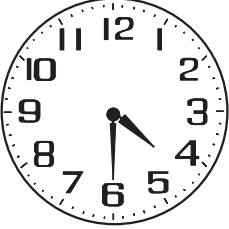
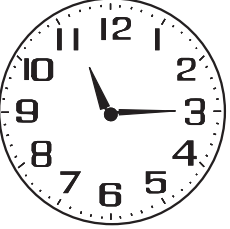
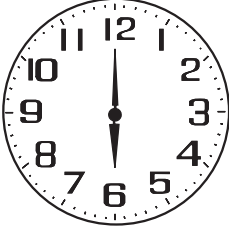
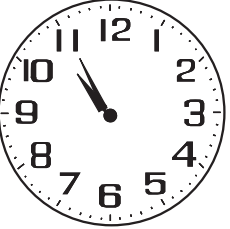
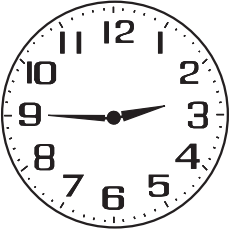
Date _____



- a) 7:10
- b) 8:10
- c) 9:00



Fill in the circle next to the correct time.

1.  <input type="radio"/> a) 7:05 <input type="radio"/> b) 9:05 <input type="radio"/> c) 9:10	2.  <input type="radio"/> a) 7:25 <input type="radio"/> b) 7:30 <input type="radio"/> c) 7:35
3.  <input type="radio"/> a) 3:20 <input type="radio"/> b) 3:40 <input type="radio"/> c) 3:45	4.  <input type="radio"/> a) 4:15 <input type="radio"/> b) 4:30 <input type="radio"/> c) 5:30
5.  <input type="radio"/> a) 11:15 <input type="radio"/> b) 11:20 <input type="radio"/> c) 11:45	6.  <input type="radio"/> a) 4:00 <input type="radio"/> b) 5:00 <input type="radio"/> c) 6:00
7.  <input type="radio"/> a) 10:55 <input type="radio"/> b) 11:00 <input type="radio"/> c) 11:50	8.  <input type="radio"/> a) 9:00 <input type="radio"/> b) 1:15 <input type="radio"/> c) 2:45