TRƯỜNG ĐẠI HỌC VĂN LANG **KHOA: NGOẠI NGỮ**

ĐỀ THI VÀ ĐÁP ÁN ĐỀ THI KẾT THÚC HỌC PHẦN Học kỳ 1, năm học 2023 - 2024

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Hình thức thi: Trắc nghiệm kết hợp tự luận

SV được tham khảo tài liệu: Có □ Không ⊠

Cách thức nộp bài phần tự luận: SV gõ trực tiếp trên khung trả lời của hệ thống thi; Vui lòng không đảo thứ tự câu hỏi của 2 bài đọc.

PHÀN TRẮC NGHIỆM (5 điểm)

SECTION 1 (2.5 marks)

Read the passage and choose the correct option to answer each question.

It's obvious that the best way to explore a city is with a friend who is courteous, humorous, intelligent and-this is essential-extremely well-informed. Falling that, and if it is London you are visiting, then the next best thing may well be Martin Priestly, former university lecturer, now a guide, who seems to bring together most of the necessary virtues and who will probably become a friend as well.

Last spring, I took a trip around London with him, along with a party of Indian journalists. Accustomed to guides who are occasionally excellent but who often turn out to be arrogant, repetitive and sometimes bossy, I was so struck by Priestly's performance that I sought him out again to see, if I could, just how the trick was done.

This time the tour was for a party of foreign students, aged anything between 20 and 60, who were here to improve their English, which was already more than passable. As the 'tourists' gathered, Martin welcomed them with a kind of dazzled pleasure, as if he had been waiting for them with excitement and a touch of anxiety, now thankfully relieved. I have to say, all this seemed absolutely genuine.

Then we got on the coach and we were off. Martin sat in front, not in the low - level guide's seat, but up with the group, constantly turning round to make eye contact, to see if they understood him. Soon we're in a place called Bloomsbury, famous among writers in the early 20th century. 'Bloomsbury is famous for brains', says Martin, getting into his stride. It's a very clever place. It's not very fashionable but It's very clever. Soon after, we pass the British

Museum and Bedford Square, 'a great architectural showpiece', advises Martin. The comment prompted questions which led to a conversation about building, the part played by wealthy people and how big chunks of London still belongs to them- an issue which was to re - emerge later. This was how he liked to work: themes, introduced as if spontaneously, were laid down for subsequent discussion.

Suddenly the coach stopped and it was over, two and a half hours of nonstop performance, with information, observation and humour. Martin says encouragingly, 'I do hope you enjoy London'.

We go to a nearby café to talk. Why, I asked, had he become a guide? 'Well, I used to organize a lot of courses at the university I worked for. **It** was quite stressful. But I had shown students around London and I enjoyed that. It seemed an obvious move to make. I did the London Tourist Board's Blue Badge course – two evenings a week for two years. That was tough, especially the exam in what is known as "coaching". You're taught to smile but everybody had difficulty with that in the exam, when you have other things to worry about. You have to do it backwards in the coach, desperately casting your eyes about to see what is coming next, and you're facing the tutors and the other trainees.

'And you have to know so much to guide well, different places, all kinds of architecture, agriculture. What if somebody asks a question about a crop beside the road? But **some of it sticks**, you know ... eventually'. He also tells me he keeps himself up to date with radio, TV and newspapers.

There are several hundred other guides out there, all looking for a share of the work. I think, as we talk, that I am starting to understand why good guides are so rare. It's a great deal harder than it looks, and it demands, for every stretch of road, an even longer stretch of study and forethought.

What do we learn about Martin in the first paragraph?

- **A**. His job suits his personality.
- **B**. He is a colleague of the writer.
- **C**. His job is an extension of his hobby.
- **D**. He has two educational roles.

ANSWER: A

When was the first time the writer explored London with Martin?

- A. last spring
- B. last summer
- C. last fall
- D. last winter

ANSWER: A

The writer decided to meet Martin again to find out how he managed to

- **A**. avoid the failings of many other tour guides.
- **B**. entertain large and varied tour groups.
- C. win custom from other tour guides.
- **D**. encourage people to go back to him for another tour.

ANSWER: A

The writer notes that on meeting the tour group, Martin

- **A**. greeted everyone warmly.
- **B**. seemed as nervous as everyone else.
- **C**. everyone for their prompt arrival.
- **D**. checked that everyone could understand him.

ANSWER: A

Martin's approach to guiding is to

- A. encourage tourist participation.
- **B**. begin with the oldest buildings.
- **C**. move around the coach as he talks.
- **D**. find out how much visitors know first.

ANSWER: A

What does "it" in line 2 in paragraph 6 refer to?

- A. arranging courses
- **B**. performing in front of a group
- C. becoming a guide
- **D**. showing students around London

ANSWER: A

Martin says that the 'coaching' exam is difficult because

- **A**. there is so much to think about.
- **B**. you have to smile in different ways.
- C. it has so many sections.
- **D**. you have to cover different routes.

ANSWER: A

In lines 2-3 in paragraph 7, what does 'some of it sticks' mean?

- A. Some information is remembered.
- **B**. Some facts are up to date.
- C. Some questions are answered.
- **D**. Some lessons are revised.

ANSWER: A

In the last paragraph, the writer says he is impressed by

- **A**. the amount of preparation involved in Martin's job.
- **B**. the quantity of work available for tour guides.
- C. the distances Martin covers on his tours.
- **D**. the variety of approaches taken to guiding.

ANSWER: A

What is the best title for the article above?

- **A.** The best kind of know-it-on
- **B**. Martin Priestly knows everything

C. Differences between good and bad tour guides

D. How to explore a city with your friend

ANSWER: A

SECTION 2 (2.5 marks)

Read the passage and decide whether each given statement is True (T) or False (F)

TRUE if the statement agrees with the information

FALSE if the statement contradicts the information

How I was floored by a tick

When Allan Little began to feel ill, he knew almost immediately what it was - Lyme Disease. But getting a medical diagnosis, and treatment, took a lot longer. I'd been going for years to the same little town in New England and Lyme Disease is everywhere there. You can't walk more than a few hundred meters in the countryside without coming across a public health notice warning you not to get bitten by a deer tick.

So, the intense headache, the aching limbs, the burning joints, the ferocious fever and night sweats that hit me in a matter of hours, a few days after I'd got back to London, were all consistent with what I'd read about the condition. I went to a London GP, who wasn't convinced. She took a blood sample and advised me to go home, rest, and take paracetamol. The next day, the blood test came back. It was negative for Lyme. My condition grew worse. I could hardly stand up. I called another doctor, who came to my house. He was also skeptical. He took another blood test. This too came back negative. But he gave me a prescription for powerful painkillers which made me feel well enough to get on a train to Edinburgh, my home town.

Within three hours of arriving at Waverley Station I was an in-patient in the Infectious Diseases Department of the city's Western General Hospital: diagnosis, Acute Lyme Disease. By now I had found the tick bite and the distinctive livid red rash, about six inches in diameter. (To be fair to those London GPs, I hadn't noticed it when I'd consulted them.) "It's attacked your liver," the Edinburgh Consultant said. "You have three distinct kinds of liver inflammation". I made a lame sick-bed joke: "You're sure that's not like Lager-and-Lime Disease then?" She laughed politely and reassured me that that would look quite different. Why then had both blood tests come back negative? Dr Roger Evans of Raigmore Hospital in Inverness is one of the UK's leading Lyme Disease researchers. "In early Lyme Disease," he told me, "the test is not reliable because no antibodies have been produced. In the first few weeks of infection, you could test negative, but still have Lyme Disease."

This is a problem for GPs, especially in urban centres where Lyme Disease is unfamiliar. Lyme is not a viral infection. It's bacterial. GPs will not prescribe antibiotics if they think

you're showing symptoms of a viral infection - and it does look and feel like a bad case of flu, or chronic fatigue syndrome, neither of which can, or should, be treated with antibiotics. "In the early weeks of infection, when the blood test is not reliable," says Evans, "the GP needs to assess the patient clinically, looking for other symptoms that identify Lyme Disease." In other words, symptoms that distinguish it from flu.

If you have been bitten:

Remove the tick as soon as possible - the safest way is to use a pair of fine-tipped tweezers, or a tick removal tool.

Grasp the tick as close to the skin as possible, pull upwards slowly and firmly, as mouthparts left in the skin can cause a local infection.

Once removed, apply antiseptic to the bite area, or wash with soap and water and keep an eye on it for several weeks for any changes.

Contact your GP if you begin to feel unwell and remember to tell them you were bitten by a tick or have recently spent time outdoors.

Catching it early is vital. Angela Howard felt ill with Lyme Disease in the 1990s. She had never heard of it. Her doctor, she says, told her to go home and see whether her symptoms persisted. It was only when a visiting American friend saw the distinctive rash - concentric red rings around the place where the tick bite had occurred that she realised she might have Lyme Disease. She says her doctor was still reluctant to diagnose Lyme. "Doctors say you can only get this abroad - that it comes from overseas. But I hadn't been abroad. I'd been picnicking in Wiltshire." She was not treated early and her symptoms have persisted for years.

There is an accumulation of anecdotal evidence that Lyme Disease often goes undiagnosed. One problem is that no-one knows how prevalent it now is. It is not a notifiable disease in the National Health Service - doctors are not required to inform a central database when they diagnose it. So there is no reliable evidence of how widespread it is, or where in the country you are most likely to get it. Roger Evans at Raigmore Hospital wants to remedy that.

"We're using Scotland as a pilot study," he said. "We're trying to create maps of areas where there's a risk of tick exposure. We're using satellite data from the European Space Agency to create an app that will give information, but which will also be interactive, so that users can put in information about where they've been bitten and whether the Lyme Disease rash has appeared." Why has Lyme, which 30 years ago seemed largely limited to a small area of New England - Lyme is the town in Connecticut where it was first identified - now so prevalent across the continental USA and in Europe? One theory is climate change: that small gradations in climate can create new habitats for micro-organisms, or keep them alive and active for longer.

I was struck, at the time of my own treatment, that awareness was far greater in Scotland than in England and Wales. And awareness of the condition is vital to catching it early. For when you catch it early, treatment is easy, and in most cases successful. It floors you though. It took me four or five months to get my strength and stamina back. It is a debilitating and dangerous illness and there is no doubt that it is getting more common. You can get it in the Scottish Highlands, in Devon and Cornwall, in Richmond Park in London and probably in your own back garden - anywhere where there are small furry animals on whose skins a deer tick can live. If you get it, you can get treatment. But take it from me: it really helps if you know what it is you've got.

Alan had no doubt about his illness from the beginning.

A. True

B. False

ANSWER: A

Both blood tests were negative for Lyme Disease.

A. True

B. False

ANSWER: A

Alan didn't become a Waverley Station patient for more than 3 hours.

A. False

B. True

ANSWER: A

Blood tests were inaccurate because they were taken unprofessionally.

A. False

B. True

ANSWER: A

We're using satellite data from the European Space Agency to create an app that will give information

A. True

B. False

ANSWER: A

When bitten, you should remove the tick, preferably with a tool.

A. True

B. False

ANSWER: A

Angela Howard felt good with Lyme Disease in the 1990s.

- A. False
- **B.** True

ANSWER: A

It is advising to contact a doctor, if you feel ill after removing the tick.

- A. True
- **B.** False

ANSWER: A

The awareness was far greater in Scotland than in England and Wales.

- A. True
- **B.** False

ANSWER: A

It is a notifiable disease in the National Health Service.

- A. False
- **B.** True

ANSWER: A

PHẦN TỰ LUẬN (5 điểm)

Choose one of the following topics to write a paragraph (at least 150 words)

Topic 1: It is wrong to keep animals in zoos. Write an argumentative paragraph to express your viewpoint.

Topic 2: Choose two regions in Vietnam, and make a comparison in both similarities and differences. Write a comparison paragraph.

ĐÁP ÁN PHẦN TỰ LUẬN: Mỗi sinh viên sẽ có đáp án phần tự luận khác nhau. Bài thi viết của sinh viên được đánh giá dựa trên tiêu chí chấm bài thi cuối kỳ kỹ năng Viết.

Rubric đánh giá bài thi Viết cuối kỳ

Tiêu chí/ điểm	Tốt (10-9)	Khá (8.5-7)	Trung bình (6.5-5)	Yếu/ Kém <5.0
Mức độ hoàn thành	-Đoạn văn bao gồm đầy đủ nội dung được yêu cầu -Các ý chính đều liên quan đến chủ đề chính của đoạn Các ý mở rộng đều bổ trợ tốt cho ý chính.	-Đoạn văn gồm 2/3 nội dung yêu cầu -Hầu như các ý chính đều liên quan đến chủ đề đoạn -Có ý mở rộng, nhưng một vài chi tiết không liên quan đến ý chính cần được bổ trợ.	-Đoạn văn chỉ bao gồm 1/2 nội dung yêu cầuĐa phần chỉ liệt kê ý chính. Một số ý chính không liên quan đến chủ đề đoạn.	 Đoạn văn chỉ liệt kê ý chính, không có ý mở rộng. Đoạn văn viết về chủ đề khác.
Bố cục	Đoạn văn gồm đầy đủ 3 phần: câu chủ đề, các câu bổ trợ và câu kết luận Sử dụng đa đạng, linh hoạt các từ nối và cohesive devices trong chương trình học.	-Đoạn văn gồm đầy đủ 3 phần chính -Các ý được liên kết với nhau bằng một số từ nối và cohesive devices. Sử dụng sai một số từ nối, cohesive devices	-Đoạn văn thiếu câu chủ đề hoặc câu kết luận -Sử dụng từ nối và cohesive devices nhưng còn nhiều lỗi sai,	Đoạn văn không có câu chủ đề và câu kết luận Không sử dụng từ nối và cohesive devices
Ngữ pháp	-Sử dụng chính xác và linh hoạt cấu trúc đơn gian và phức tạp - Hầu như không có lỗi về ngữ pháp	-Sử dụng chính xác câu đơn -Có sử dụng cấu trúc phức tạp những vẫn còn sai _ Mắc một số lỗi về ngữ pháp nhưng không ảnh hưởng đến việc truyền đạt ý	-Sử dụng đa phần là cấu trúc đơn giảnCó sử dụng cấu trúc phức tạp, nhưng mắc nhiều lỗi về ngữ pháp	Chỉ sử dụng cấu trúc đơn giản và hầu như các câu đều có lỗi về ngữ pháp
Từ vựng	-Lượng từ vựng đa dạng, phù hợp với chủ đề bài viết -Hầu như không mắc lỗi về chính tả	-Lượng từ vựng vừa đủ để diễn đạt ý. -Một số từ không phù hợp và vẫn có lỗi về chính tả	-Lượng từ vựng cơ bản nhưng diễn đạt được ý Một số từ không phù hợp hoặc lặp từ quá nhiều -Mắc nhiều lỗi chính tả	-Chỉ sử dụng một số từ cơ bản hoặc không phù hợp với chủ đề bài viết -Lỗi chính tả quá nhiều ảnh hưởng đến việc truyền đạt ý

Ngày biên soạn: 10/10/2023

Giảng viên biên soạn đề thi: Trương Hồng Ngọc

Ngày kiểm duyệt: 14/10/2023

Phó Trưởng Bộ môn kiểm duyệt đề thi: Cao Thị Xuân Tú