



Student Name: _____

MY FAMILY TRAITS WORKSHEET

Instructions: Interview members of your family to see what inherited traits you have shared. Fill in your answers on the chart below.

| | You | Mom | Dad | Sister | Sister | Sister | Other Relative | Other Relative |
|---|-----|-----|-----|--------|--------|--------|----------------|----------------|
| Height: Tall or Not | | | | | | | | |
| Whiskers & Pupils in Regular Round? Yes or No Can you tongue? Yes or No | | | | | | | | |
| Short or Long Eyebrow? Yes or No Right or Left Eyebrow? Yes or No | | | | | | | | |
| Attached or Detached Eyebrow? Yes or No Can you make a white face again? Yes or No | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Do you share any other inherited traits with your family members? Take a good look at each other! Use the blank rows above or the back of this paper to list additional traits.