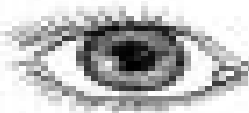


Name : \_\_\_\_\_

Date : \_\_\_\_\_

• Cut and paste to complete the sentences. Color.

## MY FIVE SENSES



I see with my : \_\_\_\_\_



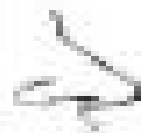
I hear with my \_\_\_\_\_



I taste with my: \_\_\_\_\_



I Cough with my \_\_\_\_\_



I Sniff with my: \_\_\_\_\_

mouth

eyes

nose

ears

hands