

## Student Data Sheet

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

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

School (teacher): \_\_\_\_\_

Time: \_\_\_\_\_

Location: \_\_\_\_\_

Observation #: \_\_\_\_\_

Utilizing the chart, below, record observations of each individual.  
Place a check in each box, based on the what you see.

<b>Sleeve Length</b>	<b>None</b>	<b>Short Sleeve</b>	<b>3/4 Length Sleeve</b>	<b>Long Sleeve</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Shoes</b>	<b>Sandals</b>	<b>Flip Flops</b>	<b>Tennis Shoes</b>	<b>Boots</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Height</b>	<b>Tall (&gt;5 feet)</b>		<b>Short (&lt;5 feet)</b>	
	<input type="checkbox"/>		<input type="checkbox"/>	
<b>Pants Length</b>	<b>Shorts</b>	<b>Capri</b>	<b>Long</b>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	