

Name _____

Date _____

FEELINGS AND EMOTIONS



How do you feel in these situations?
Write.

1. I'mwhen it's raining.
2.on Monday.
3.on Friday.
4.when I go to bed.
5.when it's really sunny and hot.
6.when I have a math test.
7.when I play sports all day.
8.when it's cold and snowing.
9.on my birthday.
10.when I think about ice cream.