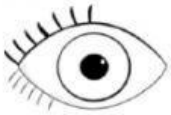
Name: _____ Date: _____

Sensory Poem: My Topic

SLO: *I can describe my topic using my senses.*

Directions: Complete the graphic organizer to describe your topic.

Topic:



I see

I hear

I smell

I touch

I taste