

Can/ Can not

Names: _____

Date: _____

Instructions: Write the words in the appropriate column

-Stick my tongue out -Raise my eyebrows -Purse my lips -Jaw dropped
-Sideways glance -Beam -Frown -Squint -Wink -Smile -Pout

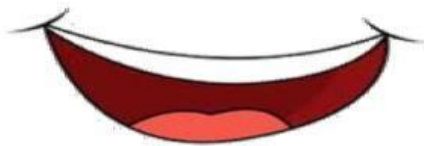
With my eyes I **can**...



Instructions: Complete the sentence.

With my eyes I **can not** _____

With my mouth I **can**...



Instructions: Complete the sentence

With my mouth I **can not** _____