NAME: _____ DATE: _____

# Find Someone Who ...




**BODY**

| | CLASSMATE'S NAME | Who...? What...? Where...? ADDITIONAL INFORMATION When...? Why...? How...? |
|---|---|---|
| ... has really big feet. | | |
| ... has very strong arms. | | |
| ... wanted to be a doctor when they were young. | | |
| ... knows how many bones there are in a human body. | | |
| ... has green eyes. | | |
| ... hurt a part of their body yesterday. | | |
| ... is very strong. | | |

| Do you ...? | Did you ...? | Are you ...? | Were you ...? |
|---|---|---|---|
| Yes, I do. No, I don't. | Yes, I did. No, I didn't. | Yes, I am. No, I'm not. | Yes, I was. No, I wasn't. |

LIVEWORKSHEETS