

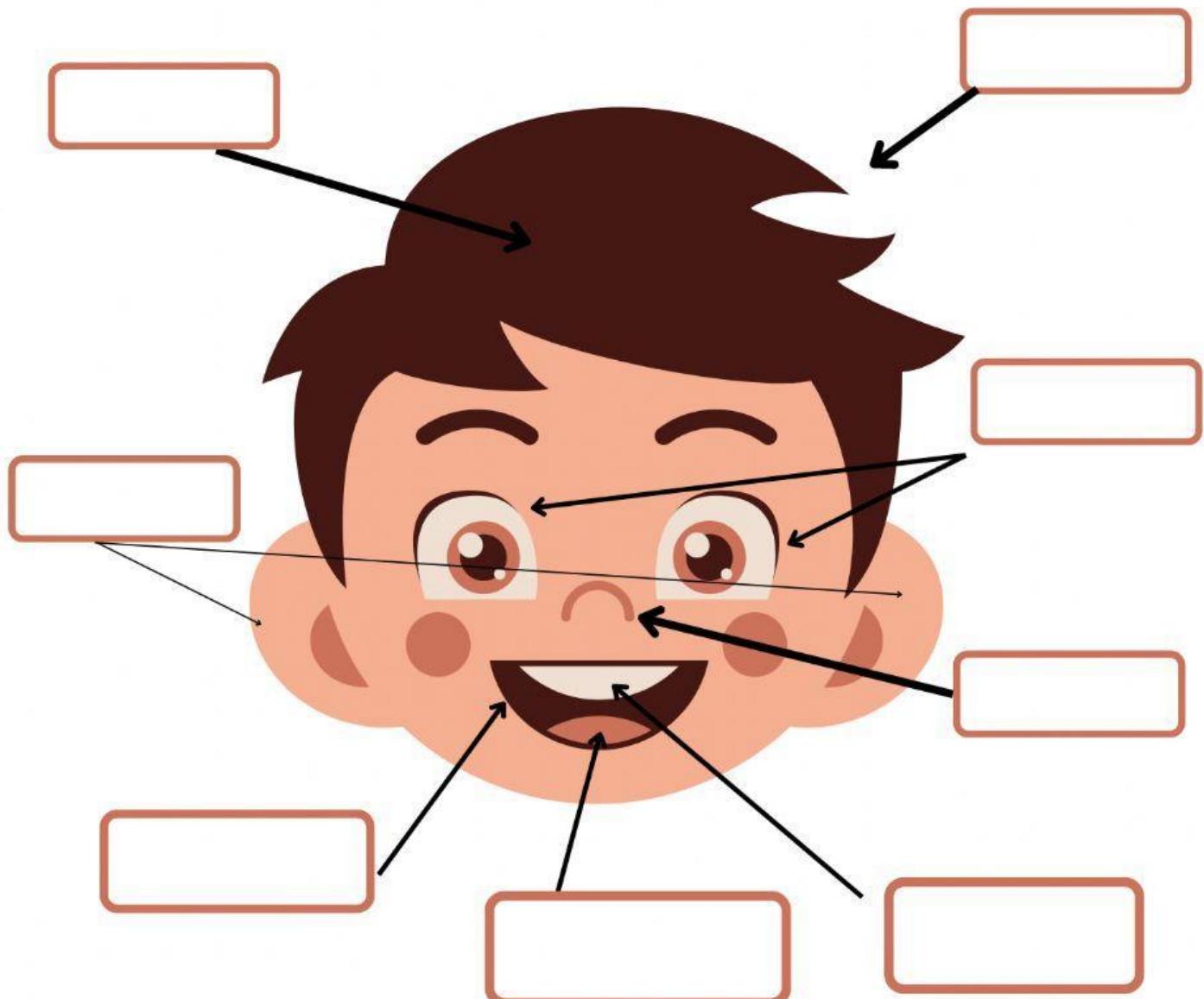
Name: _____

Score: _____

Class: _____

Date: _____

My face



ears

hair

tongue

eyes

teeth

head

nose

mouth