

Name: _____ Date: _____

Five Senses

Directions: Encircle the letter of the correct answer.

1. **Our**  **are used for** _____.

- a. tasting b. smelling c. seeing

2. **Our**  **are used for** _____.

- a. hearing b. smelling c. seeing

3. **Our**  **is used for** _____.

- a. walking b. smelling c. hearing

4. **Our**  **are used for** _____.

- a. touching b. seeing c. tasting

5. **Our**  **is used for** _____.

- a. smelling b. seeing c. tasting