

Record Sheet 3-A

Name: _____

Date: _____

I Can Test Dry Samples



Shake the sample.
What does it sound like?

Sand _____

Clay _____

Humus _____



Observe the sample.
What does it look like?

Sand _____

Clay _____

Humus _____

Record Sheet 3-A

Name: _____

Date: _____

I Can Test Dry Samples, *continued*



Smell the sample.
What does it smell like?

Sand _____

Clay _____

Humus _____



Touch the sample.
What does it feel like?

Sand _____

Clay _____

Humus _____

