

Name \_\_\_\_\_

Date \_\_\_\_\_

|                                                                                               |  |
|-----------------------------------------------------------------------------------------------|--|
| What kind of animal are you observing?                                                        |  |
|                                                                                               |  |
| What does your animal eat?                                                                    |  |
|                                                                                               |  |
| Are they breathing?                                                                           |  |
|                                                                                               |  |
| Do they have something to drink?                                                              |  |
|                                                                                               |  |
| Where does your animal sleep at night?                                                        |  |
|                                                                                               |  |
| Where does your animal spend most of its day?                                                 |  |
|                                                                                               |  |
| When you first saw your animal, what was it doing? (e.g. eating, sleeping, working, standing) |  |
|                                                                                               |  |
| What might your animal need in winter versus summer?                                          |  |
|                                                                                               |  |