

Name: \_\_\_\_\_

Date Started: \_\_\_\_\_ Date Completed: \_\_\_\_\_ Score: \_\_\_\_\_

### Learning Activity Sheet

#### Your Body's Needs As You Grow

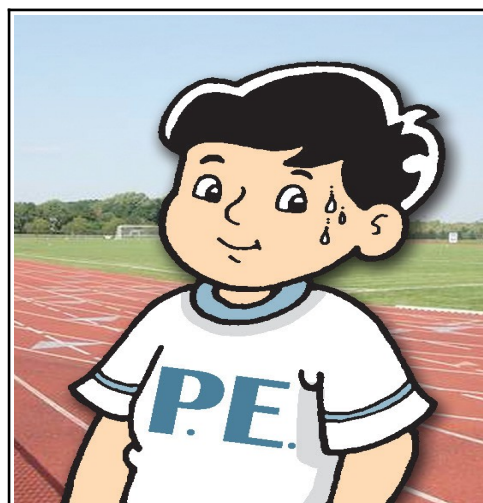
**A.** Write Yes in the blank if the sentence shows good practice, and No if it does not.

- \_\_\_\_\_ 1. I go to bed early at night.
- \_\_\_\_\_ 2. I keep my toys after I use them.
- \_\_\_\_\_ 3. I do not talk to people I do not know.
- \_\_\_\_\_ 4. I eat my breakfast before I go to school.
- \_\_\_\_\_ 5. I never play with matches and sharp objects.

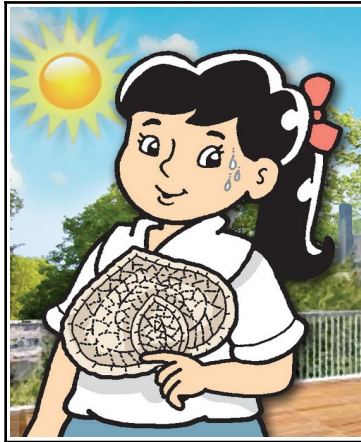
**B.** Circle what the children need in order to grow healthy and strong. Choose from the options listed below each picture.



They Need:      water  
                      shelter  
                      air



He needs:        exercise  
                      rest  
                      food



She needs:      food  
                         fresh air  
                         shelter



She needs:      rest  
                         exercise  
                         food



He needs:      food  
                         sleep  
                         air