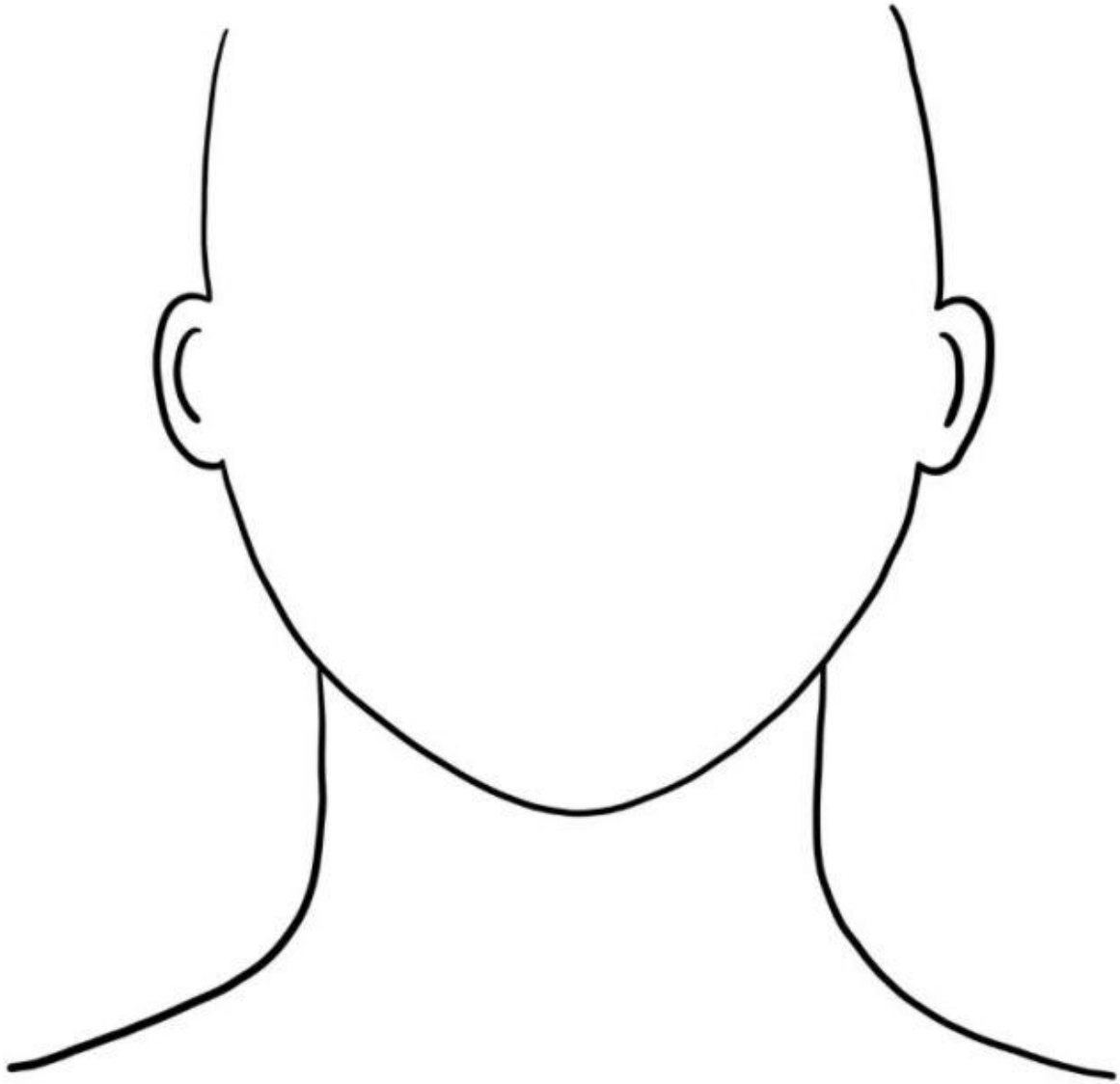


NAME: _____

DATE: _____



DRAW MYSELF

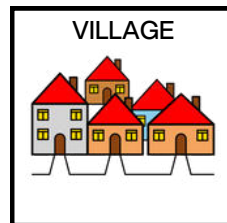
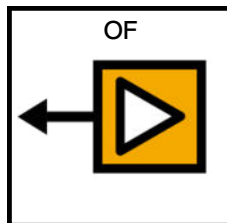
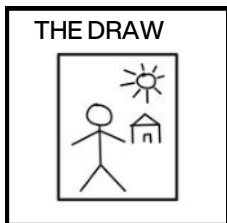
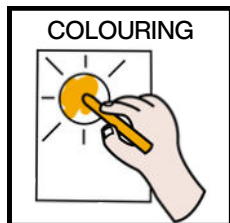


NAME _____

DATE: _____



COLOURING ACTIVITY WITH VISUAL DELIVERY

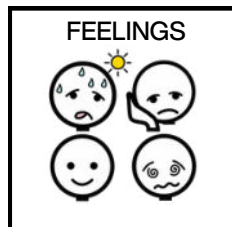
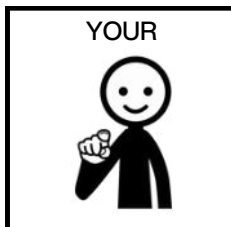
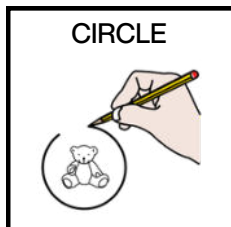


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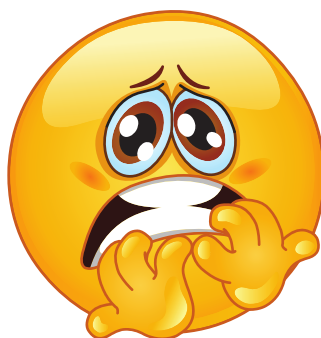
DATE: _____



HOW I FEEL



ENTERTAINED



SCARED



SHY



ANGRY



SAD



CONFUSED



BORED



LOVED



HAPPY