

Your Name _____

Observation Chart for _____

(Name of Vegetable or Fruit)

| | Sample 1 | Sample 2 | Sample 3 |
|---|-----------------|-----------------|-----------------|
| Sight How big is it? (Measure) Describe what it looks like. | | | |
| Touch What does it feel like? What is its texture? | | | |
| Smell Describe what it smells like. | | | |
| Taste Describe how it tastes and feels in your mouth. | | | |