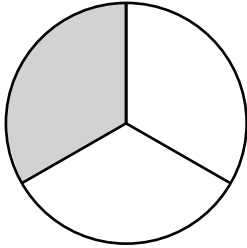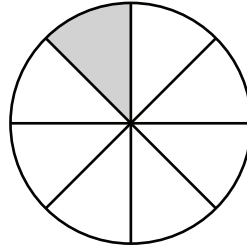Name: _____   Date: _____

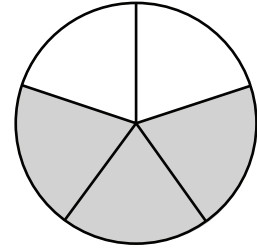# Fraction of a Whole Check-in

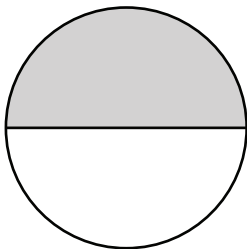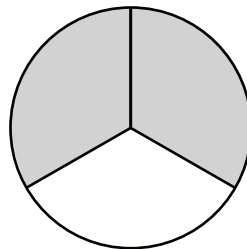Write the **shaded** fraction of each shape below.
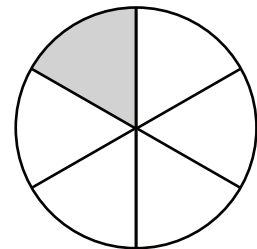
$$\frac{1}{3}$$
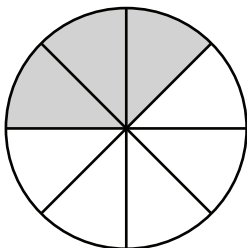
$$\frac{1}{8}$$

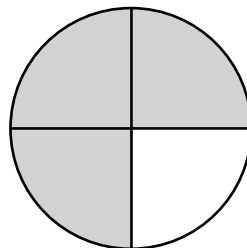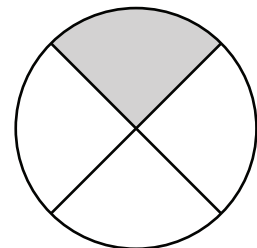$$\frac{3}{5}$$

$$\frac{1}{2}$$

$$\frac{2}{3}$$

$$\frac{1}{6}$$

$$\frac{3}{8}$$

$$\frac{3}{4}$$

$$\frac{1}{4}$$