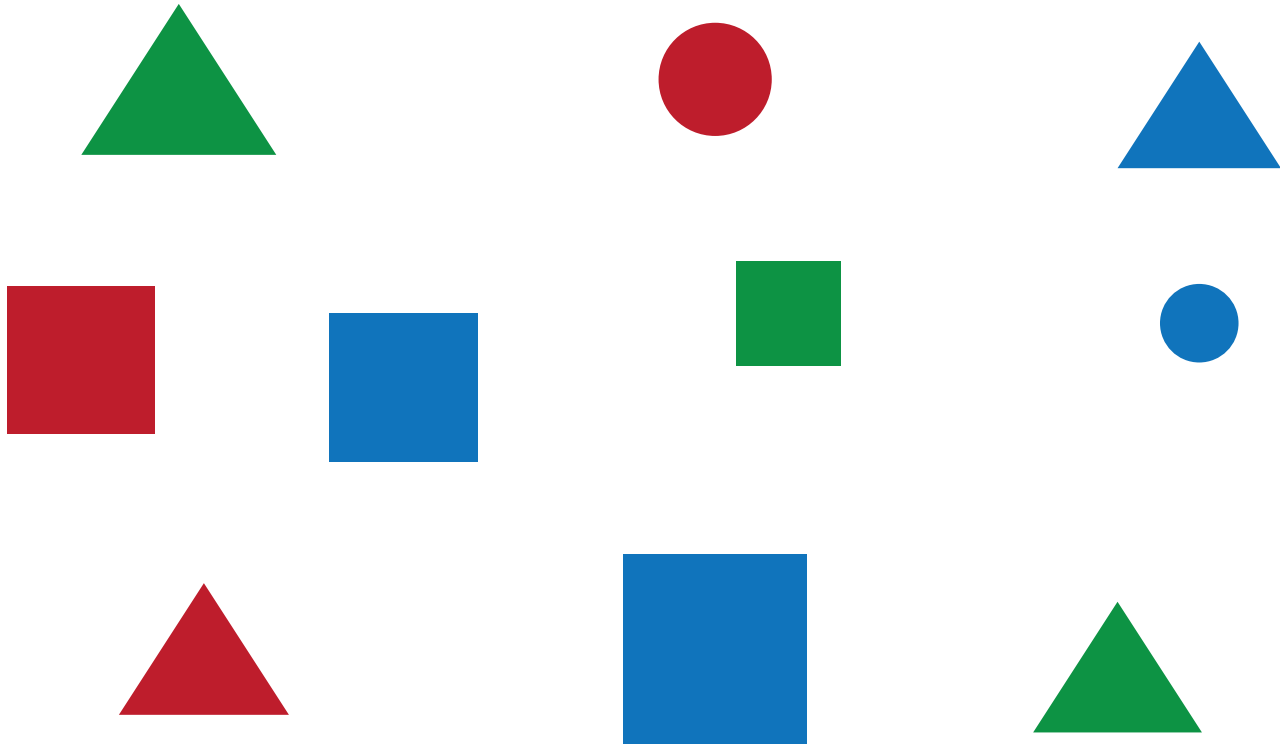


Name: \_\_\_\_\_

Date: \_\_\_\_\_

# SORTING CHECK-IN



## How Many?

Red \_\_\_\_\_

Squares \_\_\_\_\_

Blue \_\_\_\_\_

Circles \_\_\_\_\_

Green \_\_\_\_\_

Triangles \_\_\_\_\_