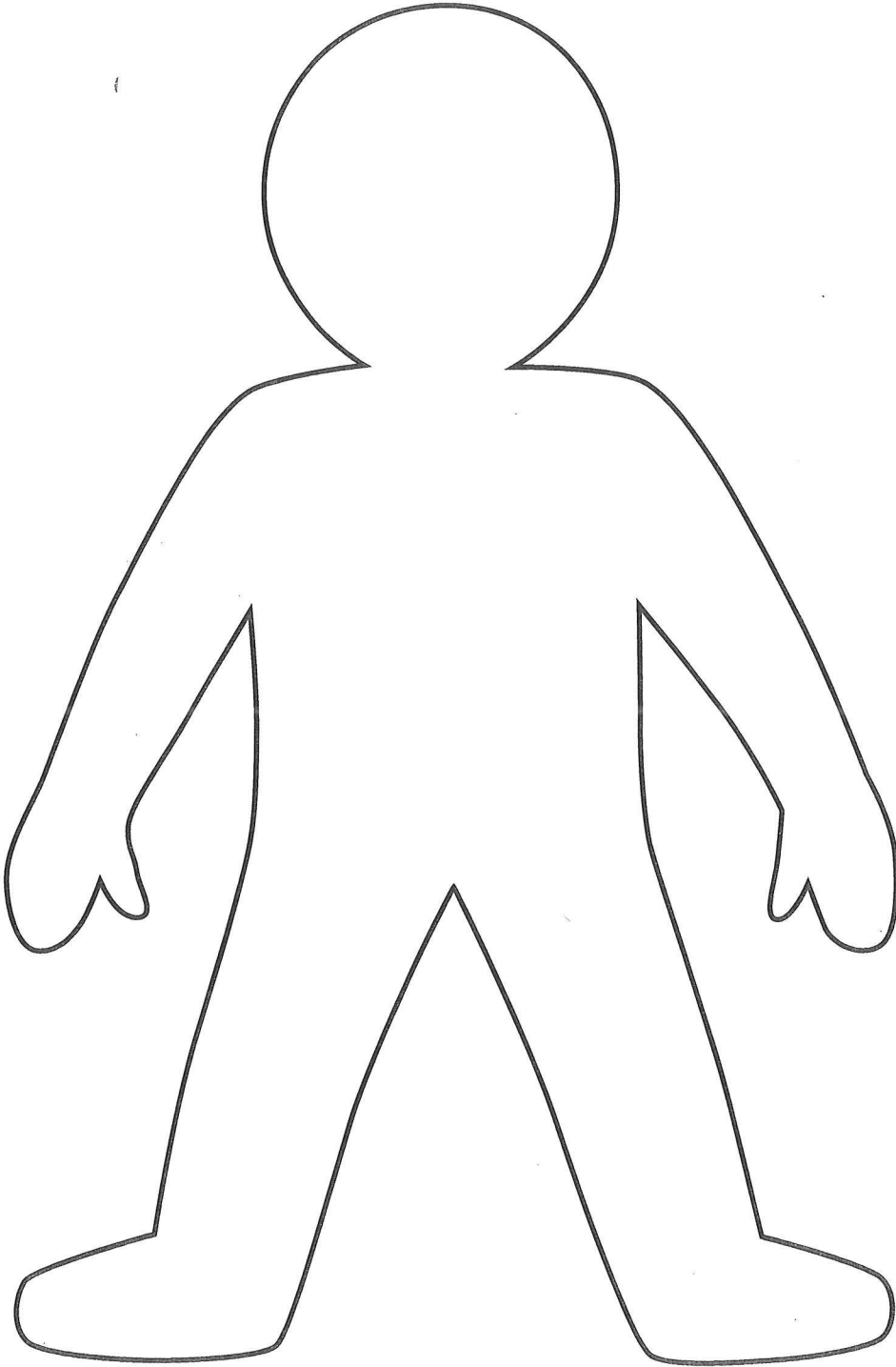


## P1 Session 2

Name:

---



Head

Legs

Feet

Chest

Stomach

Elbow

Knee

Arms

Hands

## P1 Session 2

Name

**That was me then!**

Draw

Write

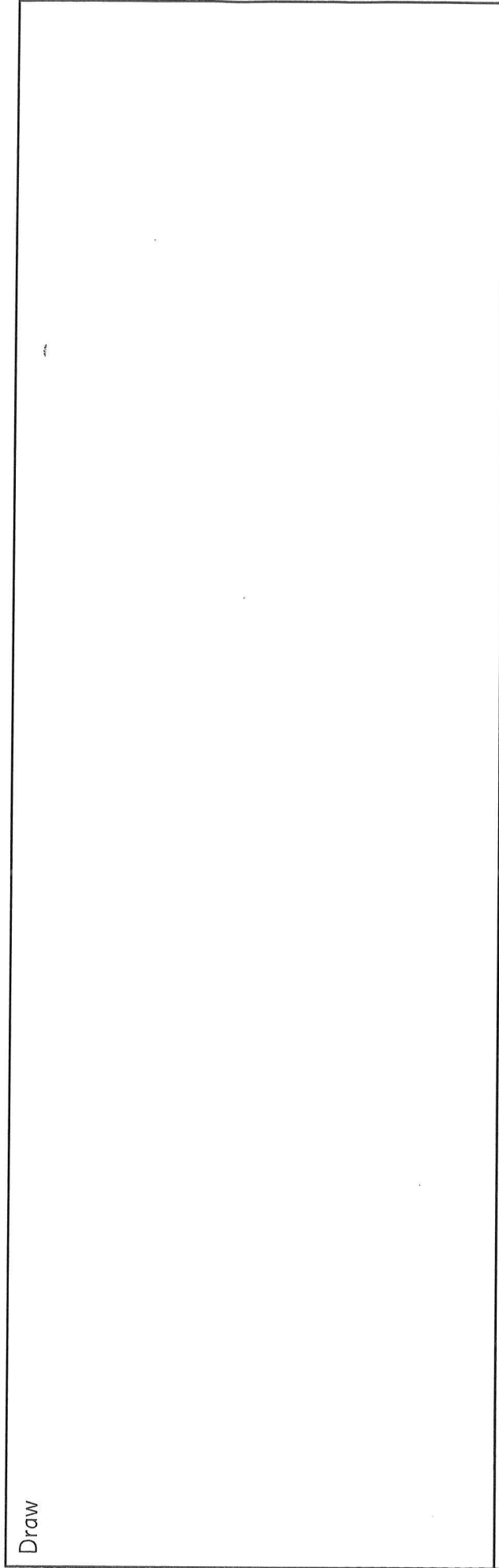
(Adapted from SLC Healthy Programme of Study)

# P1 Session 2

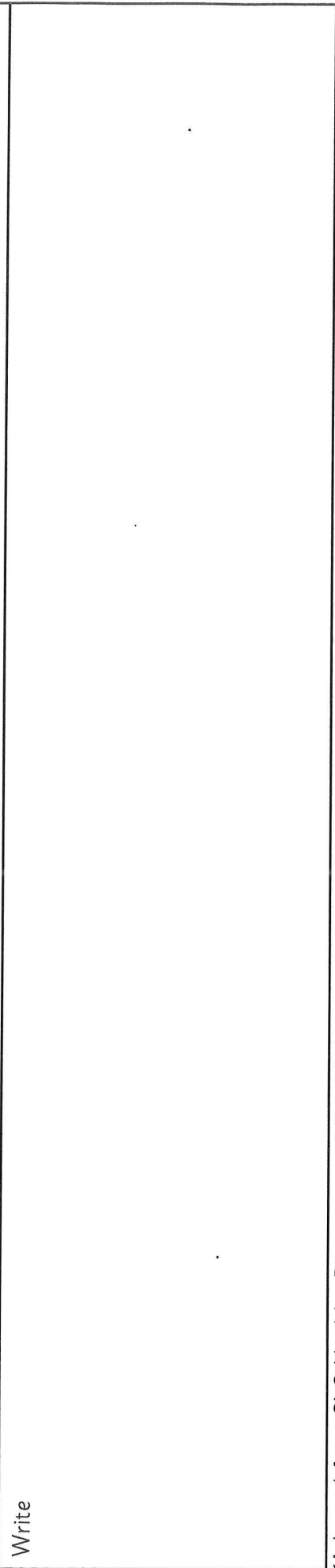
Name

This is me now!

Draw



Write



(Adapted from SLC Healthy Programme of Study)