| Seed GERMINATION | ON Name | |
|------------------------------|---------------------------------------|--------------------------------|
| | Page 1 of 2 | Period |
| <u> </u> | | |
| | arly G of an E | |
| | N by GERMINATING <u>5 or 10 SE</u> | <u>EEDS</u> . |
| A. SEED REQUIR | | |
| · · | r towels and a plastic bag for a | |
| | hey get W, as moisture. | • |
| | he stored FOOD in the seeds, t | hey need O |
| | H will be provided. | |
| B. CLASS REQUI | | |
| | SEEDS so you can <u>see</u> them thro | • |
| | oist paper towels to create a sh | |
| | Γand LEAVES have room to gro | |
| | SEEDS so some of them are UP. | |
| | ith your NAME, PERIOD, and st | tarting DATE. |
| | TER STANDING IN BAG. | |
| C. Write and/or il | lustrate OBSERVATIONS at le | ast 5 times. |
| Describe | e your set up, including number o | and type of seeds. |
| 2. What gre | ew first? | |
| | growth of both UPSIDE DOWI | N and STRAIGHT UP seeds. |
| 4. When did | d you notice ROOT HAIRS? | |
| | d you notice green chlorophyll fo | |
| 6. Did you o | observe the food supply of the s | seed shrink as the plant grew? |
| Starting Date | Day ZERO Day # | |
| Type and Number of See | , , | |
| Type and Number of See | us. | |
| | | |
| Describe/Illustrate Place | ament of seeds | |
| BE SPECIFIC. | entern of seeds. | |
| BE SPECIFIC. | | |
| | | |
| | | |
| | | |
| Describe any other cross | al treatment | |
| Describe any other specie | ui ii euimeni. | |
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| Seed GERMINATION | Name | |
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| 7 | Page 2 of 2 | Period |
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