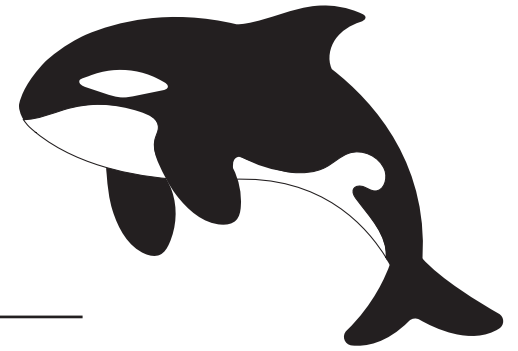


Name: _____ Date: _____



Making Inferences

Title: _____

Evidence
(what you see or read)

Prior Knowledge
(what you already know)

Inference

Empty dotted box for Evidence.

+

Empty dotted box for Prior Knowledge.

=

Empty dotted box for Inference.

Empty dotted box for Evidence.

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Empty dotted box for Prior Knowledge.

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Empty dotted box for Inference.

Empty dotted box for Evidence.

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Empty dotted box for Inference.