

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

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

## SOUND IT OUT: HOME APPLIANCES

*Social Studies & Phonics Activity*

**Directions:** Say the name of the object. Count the sounds (phonemes) you hear. Color one circle for each sound.



MOP

○ ○ ○ ○



FAN

○ ○ ○ ○



LAMP

○ ○ ○ ○



PHONE

○ ○ ○ ○



CLOCK

○ ○ ○ ○



TUB

○ ○ ○ ○