Visual Scanning Worksheets

VISUAL SCANNING WORKSHEETS

Name: _____ **Date:** _____ dd / mm / yyyy

Find all of the letter: _____

A Q L Y W E A G Z C V F O E V K M H C D T Q T X J D C Y B P O F J P V R M A U P Y Z J S N P R K S B L N D S R L I U J F J B U R G I H W I Q M B P T K
V I E T X F P G T G V N C H D N G O A D B M H B O S E X G Q C U M Z N I S C K U K W L O A L D H Q W U K V J Q H C R E Z W I H E B X E T D O R J M
V P Q S Y K P F R Z W M X P B I F F T O X Z L G J L E O A T J W U B Q V G F P K T E V L D U G X O H A I M C R J Q I Y N S M R D N L S E W Y H Z X A F
K C

Time: _____

Notes:

Practitioner Name: _____