

Name: _____

Date: _____

Fossils!

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

Paleontologist

Organism

Imprint

Fossil

Trace

Fossilization

Sediment

Extinct

Amber

Mold

Environment

Dinosaur

Feature

Stone

Cast