Your Name:

Your Laboratory Partner's Name:

Genetic Traits Activity Worksheet

Use any or all of the following URL's to research the genetic characteristics listed in the table.

www.uni.edu/walsh/genetics.html
www.biologyjunction.com/genetic\_traits\_activity.htm
www.nvcc.edu/home/rallaire/nas162/Genetics Project.htm

waynesword.palomar.edu/colorbl1.htm

Work with one partner and test each other to determine your traits. Complete the table and submit it before leaving today.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Characteristic** | **Dominant trait** | **Your trait** | **Your partner's trait** | **Possible genotype(s) for you** | **Possible genotype(s) for your partner** |
| Presence or absence of widow's peak |  |  |  |  |  |
| Ability or inability to roll tongue |  |  |  |  |  |
| Attachment or detachment of earlobes |  |  |  |  |  |
| Presence or absence of dimples |  |  |  |  |  |
| Presence or absence of freckles |  |  |  |  |  |
| Right-handedness or left-handedness |  |  |  |  |  |
| Location of thumbs when hands are crossed |  |  |  |  |  |
| Presence or absence of hair on middle segment of finger |  |  |  |  |  |
| Shape of little finger |  |  |  |  |  |
| Length of second toe compared to first |  |  |  |  |  |
| Ability to taste phenylthiocarbamide |  |  |  |  |  |
| Ability or inability to make Vulcan sign |  |  |  |  |  |
| Shape of thumbs |  |  |  |  |  |
| Color vision or color blindness |  |  |  |  |  |