

Map Analysis Resource Sheet

1	<p>Type of Map (Check One):</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Raised relief Map</td> <td><input type="checkbox"/> Natural Resource Map</td> <td><input type="checkbox"/> Satellite Photograph/Mosaic</td> </tr> <tr> <td><input type="checkbox"/> Topographic Map</td> <td><input type="checkbox"/> Military Map</td> <td><input type="checkbox"/> Pictograph</td> </tr> <tr> <td><input type="checkbox"/> Political Map</td> <td><input type="checkbox"/> Bird's Eye Map</td> <td><input type="checkbox"/> Weather map</td> </tr> <tr> <td><input type="checkbox"/> Contour Map</td> <td><input type="checkbox"/> Artifact Map</td> <td><input type="checkbox"/> Other _____</td> </tr> </table>	<input type="checkbox"/> Raised relief Map	<input type="checkbox"/> Natural Resource Map	<input type="checkbox"/> Satellite Photograph/Mosaic	<input type="checkbox"/> Topographic Map	<input type="checkbox"/> Military Map	<input type="checkbox"/> Pictograph	<input type="checkbox"/> Political Map	<input type="checkbox"/> Bird's Eye Map	<input type="checkbox"/> Weather map	<input type="checkbox"/> Contour Map	<input type="checkbox"/> Artifact Map	<input type="checkbox"/> Other _____
<input type="checkbox"/> Raised relief Map	<input type="checkbox"/> Natural Resource Map	<input type="checkbox"/> Satellite Photograph/Mosaic											
<input type="checkbox"/> Topographic Map	<input type="checkbox"/> Military Map	<input type="checkbox"/> Pictograph											
<input type="checkbox"/> Political Map	<input type="checkbox"/> Bird's Eye Map	<input type="checkbox"/> Weather map											
<input type="checkbox"/> Contour Map	<input type="checkbox"/> Artifact Map	<input type="checkbox"/> Other _____											
2	<p>Unique Physical Characteristics of the Map (Check one or more):</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Compass</td> <td><input type="checkbox"/> Name of the Cartographer</td> </tr> <tr> <td><input type="checkbox"/> Handwritten</td> <td><input type="checkbox"/> Title</td> </tr> <tr> <td><input type="checkbox"/> Date</td> <td><input type="checkbox"/> Legend</td> </tr> <tr> <td><input type="checkbox"/> Notations</td> <td><input type="checkbox"/> Other: _____</td> </tr> <tr> <td><input type="checkbox"/> Scale</td> <td></td> </tr> </table>	<input type="checkbox"/> Compass	<input type="checkbox"/> Name of the Cartographer	<input type="checkbox"/> Handwritten	<input type="checkbox"/> Title	<input type="checkbox"/> Date	<input type="checkbox"/> Legend	<input type="checkbox"/> Notations	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Scale			
<input type="checkbox"/> Compass	<input type="checkbox"/> Name of the Cartographer												
<input type="checkbox"/> Handwritten	<input type="checkbox"/> Title												
<input type="checkbox"/> Date	<input type="checkbox"/> Legend												
<input type="checkbox"/> Notations	<input type="checkbox"/> Other: _____												
<input type="checkbox"/> Scale													
3	Date of the Map:												
4	<p>Creator of the Map:</p> <p>Position /Title (if stated):</p>												
5	Where was this map produced?												
6	<p>Map Information:</p> <p>A. List three things in this that you think are important.</p> <p>B. Why do you think this map was drawn?</p> <p>C. What evidence in the map suggests it was drawn?</p> <p>D. What information is conveyed in the map?</p> <p>E. Does the information in this map support or contradict information you have read about this topic? Explain.</p> <p>F. Write a question to the cartographer that is left unanswered by this map.</p>												