**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Notes for Observations and Eyewitness Accounts**

Observations

**What are Perceptions?**

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**How Information is processed in the Brain:**

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| --- | --- | --- | --- | --- |
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**Notes from the videos:**

**Factors that affect eyewitness accounts and perceptions:**