

# Wine Tasting Sheet

Cork Academy — unofficial WSET® Level 2 study companion

|                   | WINE 1                                                                                                                                                                  | WINE 2                                                                                                                                                                  | WINE 3                                                                                                                                                                  |
|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Look</b>       |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
| Clarity           | <input type="checkbox"/> Clear <input type="checkbox"/> Hazy                                                                                                            | <input type="checkbox"/> Clear <input type="checkbox"/> Hazy                                                                                                            | <input type="checkbox"/> Clear <input type="checkbox"/> Hazy                                                                                                            |
| Colour depth      | <input type="checkbox"/> Pale <input type="checkbox"/> Medium <input type="checkbox"/> Deep                                                                             | <input type="checkbox"/> Pale <input type="checkbox"/> Medium <input type="checkbox"/> Deep                                                                             | <input type="checkbox"/> Pale <input type="checkbox"/> Medium <input type="checkbox"/> Deep                                                                             |
| Colour            | White <input type="checkbox"/> Lemon-green <input type="checkbox"/> Lemon <input type="checkbox"/> Gold <input type="checkbox"/> Amber <input type="checkbox"/> Brown   | <input type="checkbox"/> Lemon-green <input type="checkbox"/> Lemon <input type="checkbox"/> Gold <input type="checkbox"/> Amber <input type="checkbox"/> Brown         | <input type="checkbox"/> Lemon-green <input type="checkbox"/> Lemon <input type="checkbox"/> Gold <input type="checkbox"/> Amber <input type="checkbox"/> Brown         |
|                   | Rosé <input type="checkbox"/> Pink <input type="checkbox"/> Pink-orange <input type="checkbox"/> Orange                                                                 | <input type="checkbox"/> Pink <input type="checkbox"/> Pink-orange <input type="checkbox"/> Orange                                                                      | <input type="checkbox"/> Pink <input type="checkbox"/> Pink-orange <input type="checkbox"/> Orange                                                                      |
|                   | Red <input type="checkbox"/> Purple <input type="checkbox"/> Ruby <input type="checkbox"/> Garnet <input type="checkbox"/> Tawny <input type="checkbox"/> Brown         | <input type="checkbox"/> Purple <input type="checkbox"/> Ruby <input type="checkbox"/> Garnet <input type="checkbox"/> Tawny <input type="checkbox"/> Brown             | <input type="checkbox"/> Purple <input type="checkbox"/> Ruby <input type="checkbox"/> Garnet <input type="checkbox"/> Tawny <input type="checkbox"/> Brown             |
| <b>Smell</b>      |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
| Condition         | <input type="checkbox"/> Clean <input type="checkbox"/> Unclean                                                                                                         | <input type="checkbox"/> Clean <input type="checkbox"/> Unclean                                                                                                         | <input type="checkbox"/> Clean <input type="checkbox"/> Unclean                                                                                                         |
| Aroma intensity   | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Pronounced                                                                      | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Pronounced                                                                      | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Pronounced                                                                      |
| Aromas            |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
|                   |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
|                   |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
| <b>Taste</b>      |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
| Sweetness         | <input type="checkbox"/> Dry <input type="checkbox"/> Off-dry <input type="checkbox"/> Medium <input type="checkbox"/> Sweet                                            | <input type="checkbox"/> Dry <input type="checkbox"/> Off-dry <input type="checkbox"/> Medium <input type="checkbox"/> Sweet                                            | <input type="checkbox"/> Dry <input type="checkbox"/> Off-dry <input type="checkbox"/> Medium <input type="checkbox"/> Sweet                                            |
| Acidity           | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              |
| Tannin            | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              |
| Alcohol           | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High                                                                              |
| Body              | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Full                                                                            | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Full                                                                            | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Full                                                                            |
| Flavour intensity | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Pronounced                                                                      | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Pronounced                                                                      | <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Pronounced                                                                      |
| Flavours          |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
|                   |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
|                   |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
| Length            | <input type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long                                                                            | <input type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long                                                                            | <input type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long                                                                            |
| <b>Assess</b>     |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
| Quality           | <input type="checkbox"/> Poor <input type="checkbox"/> Acceptable <input type="checkbox"/> Good <input type="checkbox"/> Very good <input type="checkbox"/> Outstanding | <input type="checkbox"/> Poor <input type="checkbox"/> Acceptable <input type="checkbox"/> Good <input type="checkbox"/> Very good <input type="checkbox"/> Outstanding | <input type="checkbox"/> Poor <input type="checkbox"/> Acceptable <input type="checkbox"/> Good <input type="checkbox"/> Very good <input type="checkbox"/> Outstanding |
| Notes             |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
|                   |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |
|                   |                                                                                                                                                                         |                                                                                                                                                                         |                                                                                                                                                                         |

Think about: fruit (citrus · orchard · stone · tropical · red · black · dried) — floral — herbal/green — spice — yeast/cream — oak — earthy — signs of age

## The reveal – fill in after tasting

|                                                                                                                                                                       |                                                                                                                                                                       |                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Wine name: _____                                                                                                                                                      | Wine name: _____                                                                                                                                                      | Wine name: _____                                                                                                                                                      |
| Producer: _____                                                                                                                                                       | Producer: _____                                                                                                                                                       | Producer: _____                                                                                                                                                       |
| Type: <input type="checkbox"/> White <input type="checkbox"/> Rosé <input type="checkbox"/> Red <input type="checkbox"/> Sparkling <input type="checkbox"/> Fortified | Type: <input type="checkbox"/> White <input type="checkbox"/> Rosé <input type="checkbox"/> Red <input type="checkbox"/> Sparkling <input type="checkbox"/> Fortified | Type: <input type="checkbox"/> White <input type="checkbox"/> Rosé <input type="checkbox"/> Red <input type="checkbox"/> Sparkling <input type="checkbox"/> Fortified |
| Vintage: _____ ABV: _____                                                                                                                                             | Vintage: _____ ABV: _____                                                                                                                                             | Vintage: _____ ABV: _____                                                                                                                                             |
| Country: _____                                                                                                                                                        | Country: _____                                                                                                                                                        | Country: _____                                                                                                                                                        |
| Region: _____                                                                                                                                                         | Region: _____                                                                                                                                                         | Region: _____                                                                                                                                                         |
| Appellation: _____                                                                                                                                                    | Appellation: _____                                                                                                                                                    | Appellation: _____                                                                                                                                                    |
| Grape(s): _____                                                                                                                                                       | Grape(s): _____                                                                                                                                                       | Grape(s): _____                                                                                                                                                       |
| Price: _____ Date: _____                                                                                                                                              | Price: _____ Date: _____                                                                                                                                              | Price: _____ Date: _____                                                                                                                                              |
| Key learning: _____                                                                                                                                                   | Key learning: _____                                                                                                                                                   | Key learning: _____                                                                                                                                                   |
| _____                                                                                                                                                                 | _____                                                                                                                                                                 | _____                                                                                                                                                                 |

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