Kindergarten-First Book Slips

Name of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| Title and Author: |
| Setting: (Where did the story take place?) |
| Characters: |
| Beginning of Story: |
| Middle of Story: |
| End of Story: |
| What was your favorite part of the story? |

Number of pages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_