

DESCRIBE A SCENE

Name: _____



Answer the questions out loud.



Check each box as you go.



- | | |
|---|--|
| <input type="checkbox"/> Who is in the scene? | <input type="checkbox"/> What is in the room? |
| <input type="checkbox"/> What is she doing? | <input type="checkbox"/> Where is the girl? |
| <input type="checkbox"/> What is on her feet? | <input type="checkbox"/> When do you brush your teeth? |
| <input type="checkbox"/> What is she holding? | <input type="checkbox"/> Why do you brush your teeth? |