

Name: \_\_\_\_\_ Date: \_\_\_\_\_



## Written Composition/ Descriptive Writing

### Brainstorming Graphic Organizer

#### Character Sketch

See	Hear	Smell	Taste	Touch
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### Organizing Your Details

Name of Your Subject: \_\_\_\_\_

Personality Traits: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Appearance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Something You admire about the person

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_