Name:	Date:	

Topic or text:

# Window Notes

#### **FACTS**

What did you learn?

#### **FEELINGS & REACTIONS**

How did you feel about what you saw, heard, or read?

## **QUESTIONS**

What do you want to know or wonder about?

### **CONNECTIONS**

Can you make any connections to people, places, or things you know about?

Or to experiences you've had?