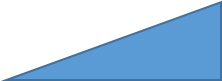
Oral Storytelling Viewer Feedback

Storyteller:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class:\_\_\_\_\_\_\_\_\_\_ Duration:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Story Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Viewer’s Name | Was their voice expressive? | Did they use body language/gestures to enhance their story? | Did they use different character voices? | Did they keep your interest? | Did their story have a beginning, middle and an end? |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Write your name in the first column.   
Then place a dash **I** on each line to represent   
your answer to each question.

Somewhat,   
some of the time

Very, all of the time, effectively