Immediate Response to Activity

Name: ___________________________  Date: ________________

Activity: _________________________________________

Identify any additional GLEs beyond those listed in your horizontal group.

What are the main content-specific concepts presented in this activity?

What concept(s) did you have difficulty understanding or need(s) additional clarification?

My comfort level in presenting this activity in my classroom is:

[ ] High   [ ] Medium   [ ] Low   because

What other questions or concerns do you have regarding this activity?