

ANTICIPATION GUIDE

NAME:

DATE:

TOPIC:

Read each statement below. Check the appropriate box to indicate whether you agree or disagree with the statement. After reading the assigned text, indicate whether you still agree or disagree with the statement. Then support your response by writing down information from the text.

Statement/Question	Before Reading	After Reading	Support in Text
1.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
2.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
3.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
4.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
5.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
6.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
7.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
8.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
9.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	
10.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	