YOUR NAME:	ANTI-BULLYING_
SCHOOL:	— Storyhogra
GRADE:	Storyboard
	Contact
CREATE YOU	
CHARACTE	RS! Kindness in Action
Tell us about the stars of your stor	ry.
Remember you don't have to fill all three box	xes.
	CHARACTER NAME:
	AGE:
	WHAT ARE THEY THINKING OR FEELING:
	CHARACTER NAME:
	AGE:
	WHAT ARE THEY THINKING OR FEELING:
	CHARACTER NAME:
	AGE:
	WHAT ARE THEY THINKING OR FEELING:

