

NAME \_\_\_\_\_

DATE \_\_\_\_\_

PERIOD # \_\_\_\_\_

**TITLE OF ARTICLE:**

**SUMMARY (75 WORD MIN):**

**CHECK YOUR WRITING:**

**After you write your article summary, list the total number of words in the box below, and use the checklist below to double check your writing. Place checkmarks in the boxes as you check your work (You will lose 3 points if you do not complete this part!):**

- Capitalization and Punctuation
- Spelling (Spell Check)
- Complete Sentences
- Paragraph Correctly
- Focused on Topic
- Good Supporting Details
- Proofread, Proofread, Proofread!

**Total words:**

----------