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| **WHAT?** | **SO WHAT?** | **NOW WHAT?** |
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Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Period\_\_\_\_\_\_\_\_

**WHAT, SO WHAT, NOW WHAT**