

Name _____

Date _____

Story Title _____

Revising Check List

Revising using this grid

Explain your score to me, if I receive scores to you

Detail

- ___ 1 I included sensory details
___ 2 All my details stay on topic

Organization

- ___ 3 My beginning, middle, and end transition well
___ 4 I have recognized any parts that were out of place

Voice

- ___ 5 My excitement or interest is obvious
___ 6 My dialogue sounds natural

Word Choice

- ___ 7 I used specific words
___ 8 I used OPSCY words and highlighted 5 of them

Sentence Fluency

- ___ 9 I varied the beginning and length of my sentences
___ 10 I used different types of sentences

___ Compound ___ Main ___ Simple ___ Periodic ___ Introductory ___ Interrogative ___ Exclamatory ___ Imperative ___ Infinitive

Now, read your paper to a peer and have them sign here if they agree with your checklist _____

Suggestion from peer _____

When finished, get an editing checklist to edit your paper,
staple that to your rough draft.