

Name: \_\_\_\_\_

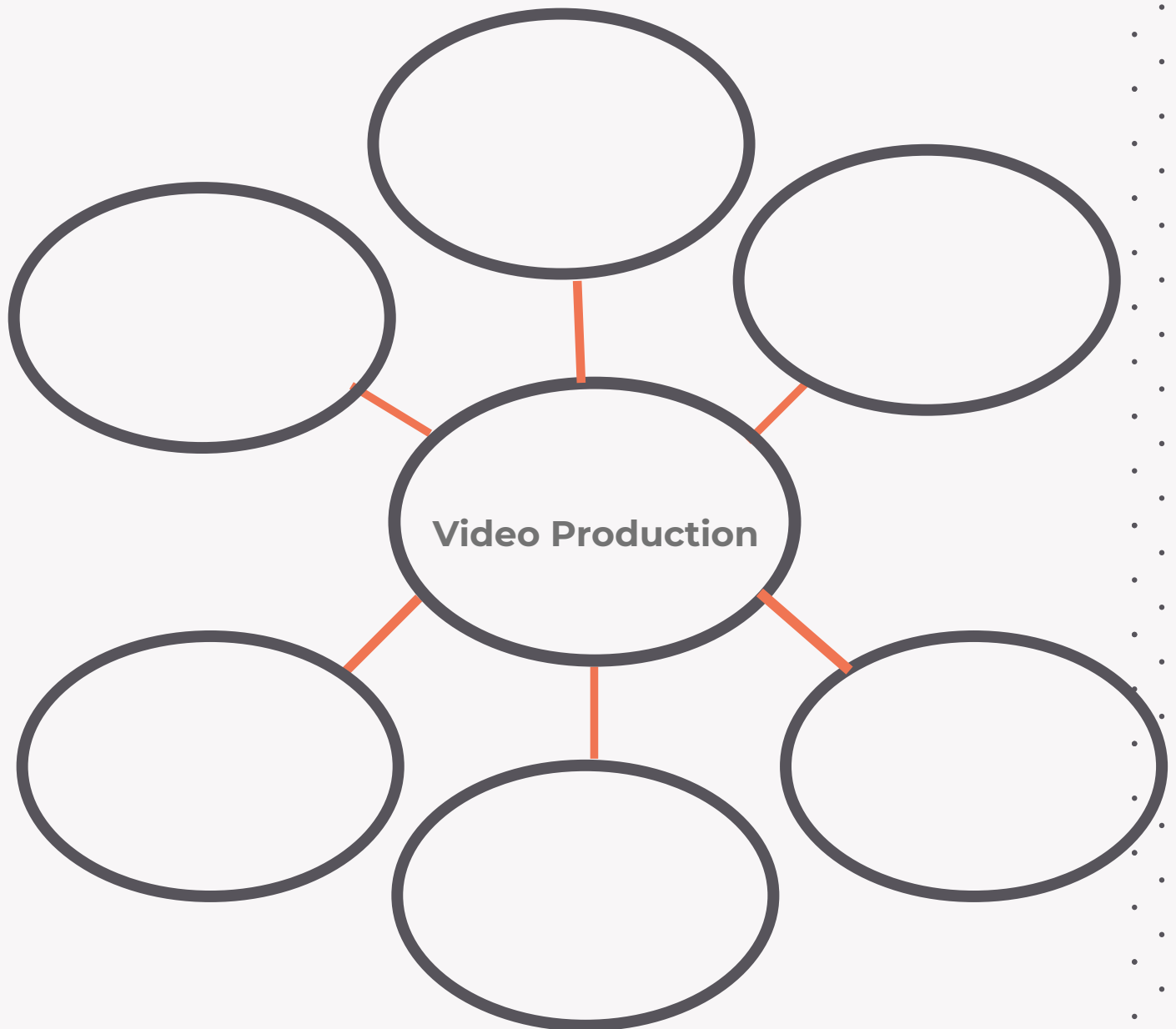
Date: \_\_\_\_\_

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# Thought Web

Handout #1 Youth Digital Story Telling Project

Use the thought web to write down any ideas you may have about the production of your video.



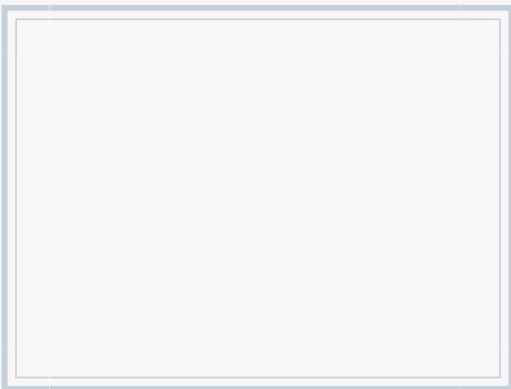
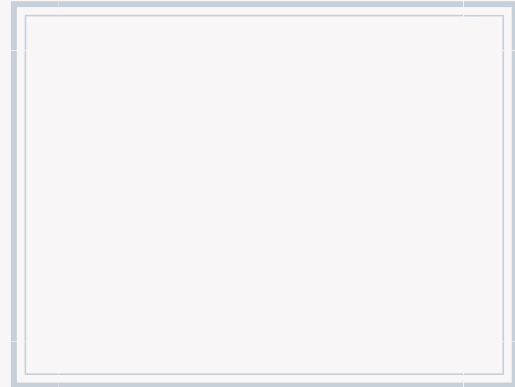
Name: \_\_\_\_\_

Date: \_\_\_\_\_

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# Story Board

Handout #2 Youth Digital Story Telling Project



Name: \_\_\_\_\_

Date: \_\_\_\_\_

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# Video Project Checklist for Students

Handout# 3 Youth Digital Story Telling Project

- Created a thought web & Storyboard
- Decided on a device(s) and app/software for the production of the video (iPad, Tablet, Camera)
- Compiled videos to include in the video (Home videos, photos, music etc.)
- Decided on an audience for the video
- Created a script or cue cards for the film production (Optional)
- Signed media consent and school permission slip passed in to the teacher
- Edited and reviewed script/cue cards by a teacher or peer
- Developed a video editing plan (This portion can be done on a separate storyboard sheet)
- Submitted a self-reflection sheet

Name: \_\_\_\_\_

Date: \_\_\_\_\_

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# Self Reflection

Handout #4 Youth Digital Story Telling Project

What did you find the most challenging about this project?

What did you like the most about this project?

What would you change if you could do the project over?

What was one important thing you learned through working with an Elder?

What are your final thoughts on the project.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

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# Teacher Checklist

Handout# 5 Youth Digital Story Telling Project  
Active Listening

- ☐ Asks peers for clarification
- ☐ Pays close attention to the speaker to improve comprehension
- ☐ Recognizes the diversity of the purpose and audience
- ☐ Listens and responds well to questions asked by classmates
- ☐ Recognizes non-verbal cues by students working in a group
- ☐ States personal experiences clearly
- ☐ Keeps points concise when speaking
- ☐ Refers to personal experiences

Name:

Date:

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# Media Consent

Handout #6 Youth Digital Story Telling Project

I hereby authorize any images or video footage taken of my youth (under 18 years of age), in whole or in part, individually or in conjunction with other images and video footage, to be shared on( Ex. Social media, school website etc.) \_\_\_\_\_ I also authorize the display and use of any media material created by my youth within the (institution name).I waive rights to privacy and compensation, which I may have in connection with such use of my youth's name and likeness, including rights to be written copy that may be created in connection with video production, editing and promotion therewith. I am over 19 years-of-age and the parent or legal guardian of the youth, and I have read this waiver and am familiar with its content.

---

Parent / Guardian Name (Please  
Print):  
Signature:  
Youth's Name:  
Date:

Name: \_\_\_\_\_

Date: \_\_\_\_\_

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# KWL Chart



**K**

**What I  
know**



**W**

**What I want  
to know**



**L**

**What I  
learned**