

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

Date: \_\_\_\_\_ Class Period: \_\_\_\_\_

## **Capable But NOT Allowed**

**Directions:** Think of a time when you were not allowed to do something that you were capable of doing. Then answer questions 1-4 based on that experience.

1. What was it that you were not allowed to do,	2. How did it make you feel?
but felt you could have done?	3. Why do you think that you were not allowed?
	4. How did you change or might you have changed the mind(s) of the person(s) who didn't allow you to do what you were capable of doing?

