

Name: _____

Date: _____

BEGINNING-MIDDLE-END STORY MAP

Plan your story by filling in the boxes below.



BEGINNING

How does your story start?



Setting

Where and when does your story happen?



Characters

Who is in your story?



Opening

What happens at the start?



MIDDLE

What happens in the middle?



Problem

What is the problem or challenge?



Events

What happens next?
List the key events.



How They Try to Solve It

What do the characters do?



END

How does your story end?



Solution

How is the problem solved?



Ending

What happens at the end?



Lesson or Message

What lesson did the characters learn? What is the message?



Story Title: _____