You Rocked It!

Name of Critic: ____________________________

Name of Actor: ____________________________

What I LOVED about your performance...

You made me feel: ____________________________

__________________________________________

__________________________________________

You made me think: _________________________

__________________________________________

__________________________________________

You made me believe: _______________________

__________________________________________

__________________________________________

You made me understand: ___________________

__________________________________________

__________________________________________

Other: _____________________________________

__________________________________________

__________________________________________

To make your performance EVEN BETTER one thing you could do is: _________________________

__________________________________________

__________________________________________