

Time Capsule

To be saved until the end of the year.

Name: _____ Date: _____

1. I want _____
2. I don't like it when _____
3. I wish I could _____
4. I feel like _____
5. My favorite _____
6. If only _____
7. Tomorrow I will _____
8. Next week I will _____
9. Yesterday I saw _____
10. I am so happy when _____
11. I do get angry when _____
12. My best _____
13. My worst _____
14. I like to remember when _____
15. When I grow up I want to be _____
16. This class is _____
17. This teacher is _____
18. I am _____