

# Creation Stories - Graphic Organizer

Names: \_\_\_\_\_ Period: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Group #: \_\_\_\_\_

Story	Genesis	Iroquois	Pima	Maya
Creator(s)	Y <input type="checkbox"/> N <input type="checkbox"/> Name: _____	Y <input type="checkbox"/> N <input type="checkbox"/> Name: _____	Y <input type="checkbox"/> N <input type="checkbox"/> Name: _____	Y <input type="checkbox"/> N <input type="checkbox"/> Name: _____
Heavens/Earth/Moon	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  
Man/woman	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  
Animals	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  
Plants	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  	Y <input type="checkbox"/> N <input type="checkbox"/> If yes, how?  
Misc. (i.e. flood, repeated motifs, completely unique elements)	Flood? Y <input type="checkbox"/> N <input type="checkbox"/> Unique/repeated element? Y <input type="checkbox"/> N <input type="checkbox"/>	Flood? Y <input type="checkbox"/> N <input type="checkbox"/> Unique/repeated element? Y <input type="checkbox"/> N <input type="checkbox"/>	Flood? Y <input type="checkbox"/> N <input type="checkbox"/> Unique/repeated element? Y <input type="checkbox"/> N <input type="checkbox"/>	Flood? Y <input type="checkbox"/> N <input type="checkbox"/> Unique/repeated element? Y <input type="checkbox"/> N <input type="checkbox"/>