

Name: _____ Date: _____ Period: _____

Schooled

H C O M M U N I T Y G A R L A N D
K H T H X S A E V H O S P I T A L
T O P P K E Q D R A U F F X M G D
T M M J M I C W J E J A A I W P Q
N E Z X A N E O D P Z H E V J X F
A S M U P H Y R V F J O M G N X L
N C A P R I C O R N H R F E Q J U
G H U E U O D Y U A K A J N F J N
E O U S M R S S F E M I S S E D K
R O L M F Z X D N G V N W G N W P
C L P J G Q X H T O R O I K Y S W
K E O U P U B L I C S C H O O L P
T D X H H N D Z Z K B H J K B Z U
Y T E R R O R X X J I C J A L A P
T S W G V A J T C V W M T C L T S
D J S B J W Q O F W Q B E T L K E
M I Q R Z N P L K T S A N N C K T

Community Garland

Public School

Homeschooled

Capricorn

Hospital

Missed

Terror

Upset

Anger

Rain