

## Reading Notes

Last Name(s) of Author(s): \_\_\_\_\_

\_\_\_\_\_

Date of publication: \_\_\_\_\_

Title: \_\_\_\_\_

\_\_\_\_\_

### Kind of text – Check All That Apply

- |                                            |                                                   |                                                |
|--------------------------------------------|---------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Primary source    | <input type="checkbox"/> Academic journal article | <input type="checkbox"/> Academic book chapter |
| <input type="checkbox"/> Newspaper article | <input type="checkbox"/> Law review article       | <input type="checkbox"/> Other book chapter    |
| <input type="checkbox"/> Government report | <input type="checkbox"/> Other types of articles  | <input type="checkbox"/> Others: _____         |

### Data and Method – Check All that Apply

- |                                                                  |                                                                                                 |
|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Ethnographic/Participant<br>Observation | <input type="checkbox"/> Survey data                                                            |
| <input type="checkbox"/> Interviews                              | <input type="checkbox"/> Census data                                                            |
| <input type="checkbox"/> Content Analysis                        | <input type="checkbox"/> Regression or Other High-Level Statistical,<br>Computer-based Analysis |
| <input type="checkbox"/> Historical/Archival Records             | <input type="checkbox"/> Trends, Averages, Counts, or Basic<br>Descriptive Statistics           |
| <input type="checkbox"/> Historical Narrative                    |                                                                                                 |
| <input type="checkbox"/> Unclear                                 | <input type="checkbox"/> Other: _____                                                           |

### When/Where does the study take place?

Decade/Century: \_\_\_\_\_

Location/Settings: \_\_\_\_\_











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**Cited Works to Read:**

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