

HOME READING LOG

Name _____

Week of _____

M O N D A Y	Title _____ Pages _____ Summary _____ _____ _____	Reading Minutes
	_____ _____	Parent Signature
T U E S D A Y	Title _____ Pages _____ Summary _____ _____ _____	Reading Minutes
	_____ _____	Parent Signature
W E D N E S D A Y	Title _____ Pages _____ Summary _____ _____ _____	Reading Minutes
	_____ _____	Parent Signature
T H U R S D A Y	Title _____ Pages _____ Summary _____ _____ _____	Reading Minutes
	_____ _____	Parent Signature
F R I D A Y	Title _____ Pages _____ Summary _____ _____ _____	Reading Minutes
	_____ _____	Parent Signature

Read at least 30 minutes per night.
Return to Mrs. Schirner on Mondays.