

Each week record the date, the number of minutes you read to your child each night, and the book title and author. Please sign and return to your child's homeroom teacher monthly.

| Date | Minutes | Book Name and author |
|------|---------|----------------------|
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Parent/Guardian signature \_\_\_\_\_

| Date | Minutes | Book Name and author |
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Parent/Guardian signature \_\_\_\_\_

| Date | Minutes | Book Name and author |
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Parent/Guardian signature \_\_\_\_\_

| Date | Minutes | Book Name and author |
|------|---------|----------------------|
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Parent/Guardian signature \_\_\_\_\_

For Office/Teacher Use Only:

Date returned \_\_\_\_\_ Teacher Signature \_\_\_\_\_

Date hours input into system \_\_\_\_\_ Coordinator Signature \_\_\_\_\_