













Name: _____ Date: _____



Reading Log



Directions: Read for at least 15 minutes each night. Due Friday!

DAY	TITLE	RATING	Parent Initials
Monday		  	
Tuesday		  	
Wednesday		  	
Thursday		  	

Parents – You can read a book to your child, with your child, or your child can read by themselves. Please initial to show that your child read each night.