Kindergarten – 3rd Grade Read Aloud

Student Name _____

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

Weeks	Date	Minutes	Book Name and Author
Week 1			
Week 2			
Week 3			
Week 4			

Total Minutes 0.0

Parent/Guardian Signature _____ Click to email

For Office/Teacher Use Only:

Date Returned _____ Teacher Signature _____

Date hours input into system _____ Coordinator Signature _____