

---FIRST Week---

Student's AT HOME Reading Log: Fri., May 15 to Thurs., May 21

Student's Name: _____

Teacher's Name: _____ Grade: _____

| Date Fecha | Book or Story Libro o Cuento | Start Time Empieza | Stop Time Termina | Minutes Read Minutos de leer | Parent Initials Iniciales Padres |
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Total Minutes Read: _____ **(include any time on back)**
Minutos leidos total: _____ **(incluido minutos del otro lado)**

