

Name _____ Period _____

Book Title _____

Weekly Reading Log

Monday:

Chapter Name/Number: _____ Page #'s: _____

Summary: _____

Tuesday:

Chapter Name/Number: _____ Page #'s: _____

Summary: _____

Wednesday:

Chapter Name/Number: _____ Page #'s: _____

Summary: _____

Thursday:

Chapter Name/Number: _____ Page #'s: _____

Summary: _____

Friday:

Chapter Name/Number: _____ Page #'s: _____

Summary: _____

****You must read at least 30 minutes and complete log each night.****

Parent Signature: _____