



Student Name: \_\_\_\_\_

# April 2024

Enter the minutes read for each date and at the end of the month enter the total minutes at the bottom of the sheet, sign, and date.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

Parent Signature: \_\_\_\_\_ Homeroom: \_\_\_\_\_ Date: \_\_\_\_\_ Total Minutes of Reading: \_\_\_\_\_