

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

Date: \_\_\_\_\_

How many hours and minutes did you read this week?

\_\_\_\_\_ hours \_\_\_\_\_ minutes

How many minutes did you read each day?

- Sunday \_\_\_\_\_
- Monday \_\_\_\_\_
- Tuesday \_\_\_\_\_
- Wednesday \_\_\_\_\_
- Thursday \_\_\_\_\_
- Friday \_\_\_\_\_
- Saturday \_\_\_\_\_

Parent Signature \_\_\_\_\_

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

Date: \_\_\_\_\_

How many hours and minutes did you read this week?

\_\_\_\_\_ hours \_\_\_\_\_ minutes

How many minutes did you read each day?

- Sunday \_\_\_\_\_
- Monday \_\_\_\_\_
- Tuesday \_\_\_\_\_
- Wednesday \_\_\_\_\_
- Thursday \_\_\_\_\_
- Friday \_\_\_\_\_
- Saturday \_\_\_\_\_

Parent Signature \_\_\_\_\_