

Student Last Name	Student First Name	Teacher	Grade

Read and Lead Recording Sheet

Sheet 1 "200 Minutes"								
(400 student/adult mini					utes combined to date) 200 Adult/Mentor Reading Minutes			
Date	200 Student Reading Minutes Book Title(s)	No. Min.		Date	Book Title(s)	No. Min.		
1/15	Read & Lead Kick-Off	50 S		1/15	Read & Lead Kick-Off	<i>MIN.</i> 50		
	TOTAL (Must EVACTIV agual 200)	200			TOTAL (Must EYACTI V aqual 200)	200		
TOTAL (Must EXACTLY equal 200) 2					TOTAL (Must EXACTLY equal 200)	200		

Parent Signature "form must be signed" (Carry over extra minutes to next sheet!)

Questions or Concerns? Please email us at: **DESReadandLead@gmail.com**

Please provide an email address/phone number in case
we have questions on the sheet:

Email:_____

Phone Number:_____