Student Last Name	Student First Name	Teacher	Grade

Read and Lead Recording Sheet

Sheet 3 "600 Minutes"

(1200 student/adult minutes combined to date)

200 Student Reading Minutes				***200 Adult/Mentor Reading Minutes***		
Date	***Book Title(s)***	***No. Min.***		***Date***	***Book Title(s)***	***No. Min.***
TOTAL (Must EXACTLY equal 200)		***200***		***TOTAL (Must EXACTLY equal 200)***		***200***

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

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

Email:_____

Phone Number:_____