



Student Last Name	Student First Name	Teacher	Grade

Read and Lead Recording Sheet

Sheet 4 "800 Minutes"

(1600 student/adult minutes combined to date)

<i>200 Student Reading Minutes</i>			<i>200 Adult/Mentor Reading Minutes</i>		
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: _____