Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: **\_\_\_\_\_\_\_\_**

PERSONAL READING LOG & GRAPH

My weekly goal is 20 minutes per night.

I will read 6 or more nights a week.

Record some of the books you read this week.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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PARENTS PLEASE SIGN BELOW.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 55 |  |  |  |  |  |  |  |
| 50 |  |  |  |  |  |  |  |
| 45 |  |  |  |  |  |  |  |
| 40 |  |  |  |  |  |  |  |
| 35 |  |  |  |  |  |  |  |
| 30 |  |  |  |  |  |  |  |
| 25 |  |  |  |  |  |  |  |
| 20 |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |

Did you meet your goal? Yes No