Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Week of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reading Rate: \_\_\_\_\_\_\_\_\_ Reading Goal: \_\_\_\_\_\_\_\_\_\_\_\_

Book Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Days of the Week: | Pages Read: |
| Example: Monday 8/10/16 | 25 |
|  |  |
| Monday |  |
| Tuesday |  |
| Wednesday |  |
| Thursday |  |
| Friday |  |
| Saturday |  |
| Sunday |  |
|  |  |
| Total Pages Read this week: |  |