Name Name of Book

Lexlile Level of Book Your Lexile Level

**READING LOG**

Directions: Read for 30 minutes each evening, five days out of the week. Select a **different focus**

**each day** for your response. All responses should be a **minimum of 2 -3 complete sentences**.

Parent signature is required.

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| #1 – Predict | #2 – Personal Connection | #3 – Ask 3 Questions | #4 – Tone | #5 – Characters |
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| **Date** | **Title** | **Pages Read** | **Min. Read** | **Focus #** | **Response** |
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