**Calvin Coolidge Reading Incentive Program**

**Reading Recording Sheet**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sheet# \_\_\_**

Please color or cross off each book below for every 30 minutes that you read or are read to.
Once your sheet is filled, have it signed and return it to your teacher.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 30 min | 30 min | 30 min | 30 min | 30 min |
| 30 min | 30 min | 30 min | 30 min | 30 min |

Great job! Remember to keep reading and bring your completed sheets back to school for credit! For more sheets, you can go to; **http://schools.shrewsbury-ma.gov/egov/docs/1233191672\_52825.pdf** for 30 minute sheets. Remember you need to complete at least ten sheets to receive a medal in May!

Parent or Teacher's Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_