

Summer Reading Program for Students Entering Grades 1-2

In order to participate in the Tackan Summer Reading Program, students entering Grades 1-2 are asked to read 15 minutes a day during the summer. You may choose books from our list or choose other books of interest. For book lists and calendar, click on the *Summer Reading* link on the Tackan Library website at www.tackanlibrary.com.

Please check off each day on the calendar for every day your child reads (or when you read to your child). **This form must be returned to your child's classroom teacher by Friday September 16, 2011 in order for your child to be eligible for the Summer Reading Celebration Ice Cream Party, funded by the PTA.**

July 2011

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
					1 ___ 15 Minutes	2 ___ 15 Minutes
3 ___ 15 Minutes	4 ___ 15 Minutes	5 ___ 15 Minutes	6 ___ 15 Minutes	7 ___ 15 Minutes	8 ___ 15 Minutes	9 ___ 15 Minutes
10 ___ 15 Minutes	11 ___ 15 Minutes	12 ___ 15 Minutes	13 ___ 15 Minutes	14 ___ 15 Minutes	15 ___ 15 Minutes	16 ___ 15 Minutes
17 ___ 15 Minutes	18 ___ 15 Minutes	19 ___ 15 Minutes	20 ___ 15 Minutes	21 ___ 15 Minutes	22 ___ 15 Minutes	23 ___ 15 Minutes
24 ___ 15 Minutes	25 ___ 15 Minutes	26 ___ 15 Minutes	27 ___ 15 Minutes	28 ___ 15 Minutes	29 ___ 15 Minutes	30 ___ 15 Minutes
31 ___ 15 Minutes						

August 2011

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
	1 ___ 15 Minutes	2 ___ 15 Minutes	3 ___ 15 Minutes	4 ___ 15 Minutes	5 ___ 15 Minutes	6 ___ 15 Minutes
7 ___ 15 Minutes	8 ___ 15 Minutes	9 ___ 15 Minutes	10 ___ 15 Minutes	11 ___ 15 Minutes	12 ___ 15 Minutes	13 ___ 15 Minutes
14 ___ 15 Minutes	15 ___ 15 Minutes	16 ___ 15 Minutes	17 ___ 15 Minutes	18 ___ 15 Minutes	19 ___ 15 Minutes	20 ___ 15 Minutes
21 ___ 15 Minutes	22 ___ 15 Minutes	23 ___ 15 Minutes	24 ___ 15 Minutes	25 ___ 15 Minutes	26 ___ 15 Minutes	27 ___ 15 Minutes
28 ___ 15 Minutes	29 ___ 15 Minutes	30 ___ 15 Minutes	31 ___ 15 Minutes			

Student Name: _____ Teacher: _____ Grade: _____

Parent/Guardian Signature: _____