




Keeping Track of My Reading at Home

Name: _____

Week of: _____

<div>Title of book</div> <div>* Write pages/chapters read if the book is not completed in one day</div>	Date	Number of minutes read	<div></div> <div>Loved it!</div>	<div></div> <div>Okay</div>	<div></div> <div>Not So Good</div>
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday (optional)				
	Saturday (optional)				
	Sunday (optional)				