

Name _____

Please initial and put the amount of time read for each night that homework in each area is completed. Thank you!

December

	Monday 11/30	Tuesday 12/1	Wednesday 12/2	Thursday 12/3
Language Arts	X			
Reading (15 min.)	X			
Sight Word Practice	X			

	Monday 12/7	Tuesday 12/8	Wednesday 12/9	Thursday 12/10
Language Arts				
Reading (15 min.)				
Sight Word Practice				

	Monday 12/14	Tuesday 12/15	Wednesday 12/16	Thursday 12/17
Language Arts				
Reading* (15 min.)				
Sight Word Practice				

**I know this time of year is a crazy one, but please try and have your child read at least for a few minutes each day so that they can keep up their skills. Even if it is the same book for 14 days it is better than no reading at all.*