

SECOND GRADE READING LOG

Students are to read for approximately 20 min. each night. This is due on Monday.

Student Name: _____ # _____ Date: _____

Date	Title and Author	Evaluation Of Story
Mon. ----/----/----	_____ _____ _____ _____	☺ I loved the book! ☹ The book was okay. ☹ I did not like the book.
Tues. ----/----/----	_____ _____ _____ _____	☺ I loved the book! ☹ The book was okay. ☹ I did not like the book.
Wed. ----/----/----	_____ _____ _____ _____	☺ I loved the book! ☹ The book was okay. ☹ I did not like the book.
Thurs. ----/----/----	_____ _____ _____ _____	☺ I loved the book! ☹ The book was okay. ☹ I did not like the book.
Fri. ----/----/----	_____ _____ _____ _____	☺ I loved the book! ☹ The book was okay. ☹ I did not like the book.

Parent Signature: _____

Comments by Parent or Teacher: _____

Score: ____/10