

2014 Summer Reading Program

Student Name

Fall 2014 Teacher _____

| Title of Book | Number of Pages Read | What genre is the book? Why do you like this book? |
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| TOTAL number of pages reported on this page | | |

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Please print as many copies of this reading log as you need to report all the pages you read from Monday, May 12, 2014 through Thursday, August 21, 2014. Return your completed forms to your school library media specialist by Friday, August 22, 2014.