AP Sustained Reading #1

Name: Period:

30 minutes x 3 week minimum requirement

|  |  |  |  |
| --- | --- | --- | --- |
| Week 1 8/3 – 8/9Dates of Reading | Minutes Spent | Text Title, Source & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 1Due 8/10 |

|  |  |  |  |
| --- | --- | --- | --- |
| Week 2 8/10 – 8/16Dates of Reading | Minutes Spent | Text Title, Source & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 2Due 8/17 |

|  |  |  |  |
| --- | --- | --- | --- |
| Week 3 8/17 – 8/23Dates of Reading | Minutes Spent | Text Title, Source & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 3SUBMIT TO TEACHER ON 8/24 |

AP Sustained Reading #2

Name: Period:

30 minutes x 3 week minimum requirement

|  |  |  |  |
| --- | --- | --- | --- |
| Week 4 8/24 – 8/30Dates of Reading | Minutes Spent | Text & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 4Due 8/31 |

|  |  |  |  |
| --- | --- | --- | --- |
| Week 5 8/31– 9/6Dates of Reading | Minutes Spent | Text & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 5Due 8/17 |

|  |  |  |  |
| --- | --- | --- | --- |
| Week 6 9/7 – 9/13Dates of Reading | Minutes Spent | Text & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 6SUBMIT TO TEACHER ON 9/14 |

AP Sustained Reading #3

Name: Period:

30 minutes x 3 week minimum requirement

|  |  |  |  |
| --- | --- | --- | --- |
| Week 7 9/14 – 9/20Dates of Reading | Minutes Spent | Text & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 7Due 9/20 |

|  |  |  |  |
| --- | --- | --- | --- |
| Week 8 9/21 – 9/27Dates of Reading | Minutes Spent | Text & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 8Due 8/17 |

|  |  |  |  |
| --- | --- | --- | --- |
| Week 9 9/28 – 10/4Dates of Reading | Minutes Spent | Text & Author Read | Parent’s Initials |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Minutes – Week 9SUBMIT TO TEACHER ON 10/14 |