











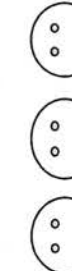


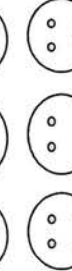

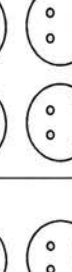



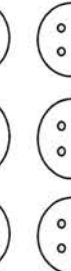

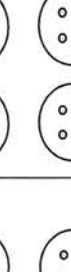




Date: _____

[illegible]

Goals	Reading Support 9:30 – 10:00	KidWriting 10:15 – 10:45	Math 12:00 – 12:30	Handwriting 2:45 – 3:00
I listened to my teacher the first time.	First 5 minutes			
	Rest of the lesson			
I looked at my teacher when she was talking.	First 5 minutes			
	Rest of the lesson			
I am kind to my friends.	First 5 minutes			
	Rest of the lesson			
I finished all of my work.	First 5 minutes			
	Rest of the lesson			

Parent Signature: _____