Summer Reading Challenge



*Be sure to write the date on each box as completed

*A story or book = 1 box *Fill up as many boxes as you can! *Younger students may be read to by an adult or older sibling *Return completed and signed chart the first week of school

Student Name: _____

With your friends or siblings	Outside wearing sunglasses or a hat	In a cozy corner or nook	A fantasy book	On vacation	On a picnic	While eating a snack	To someone younger or to your pet	A magazine or newspaper	A recipe (and make it too!) YUM!
Date	Date	Date	Date	Date	Date	Date	Date	Date	Date
Directions for a game and then play the game! Date	A story about friends.	A poem or song lyrics.	A book and then write a note to someone telling them about it.	An email or letter to or from a relative or friend.	On a rainy day (inside)	A book that someone else selected for you.	Directions to make a craft (and then make the craft).	A mystery book.	In the car.
	Date	Date	Date	Date	Date	Date	Date	Date	Date
A Fairy Tale	In a real tent or in a pretend blanket fort.	On a swing or hammock	A book while sitting under an umbrella	By finding the letters of the alphabet in order while in a store	A historical book	On or under a blanket	About a place you want to visit	About your favorite sport or hobby.	A book based on a true story
Date	Date	Date	Date	Date	Date	Date	Date	Date	Date
A book that is part of a series	Re-read a favorite story Date	A funny book	Listen to a story on a computer or other electronic device Date	A Tall Tale / Legend Date	A brochure from a place that you visited or would like to visit Date	The choices on a menu of a restaurant Date	A book with a color word in the title Date	A book while listening to music Date	On a beach or in the sand
On a different vehicle (boat, train, truck, plane, scooter, or skateboard)	By finding the letters of the alphabet in order while you ride in the	A non-fiction book	A cereal box or other food box	A graphic novel or comic book	A book while your bare feet are in the grass	A story about an animal	By flashlight	A story about a family	A book by your favorite author
Date	car Date	Date	Date	Date	Date	Date	Date	Date	Date

Parent/Guardian Signature: