East Missouri Action Agency, Inc. Head Start

**Weekly Reading Homework Assignment**

**Due Date_____**

Directions for filling out next two lines: 1) Print letters, 2) Spell the words out loud, 3) Say "Capital" every time you capitalize a letter.

Child's name: _____

Name of book: _____

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Questions for child: (Adult prints out what the child says.)

1. Did you like this book?

2. What did you like/not like about the book? OR What happened in the story?

Child's signature: _____

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Questions for adult:

1. Rate how well your child likes being read to at home: 1 2 3 4 5
   very little very much

2. **About how many books were read to your child this week outside of Head Start? _____**
   **(Include books read by caregivers, relatives and friends as well as yourself.)**
   Note: *If one (1) book was read 5 times that = 5 books.*

Adult's signature: _____

*"Adult" is anyone old enough to read to child and fill out this form.