

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Grade: \_\_\_\_\_ New Teacher: \_\_\_\_\_

Return this form to your new teacher within the first three days

# Frostwood Summer Reading Log



	<b><u>Title of Book</u></b>	<b><u>Date</u></b>	<b><u>Parent Initials</u></b>
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