|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date: |  | Term: |  | Week: |  |

**WHAT IS HAPPENING THIS WEEK?**

|  |  |  |  |
| --- | --- | --- | --- |
| **THEME:** | | | |
| LETTER/S | NUMBER/S | COLOUR/S | SHAPE/S |
|  |  |  |  |
| WORD/S TO PRACTICE: | | | |

**READ A BOOK A NIGHT WITH YOUR CHILD: (tick when complete)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S | M | T | W | *Remember to discuss the book you are reading together and question their understanding.* |

**NOTES/THINGS TO DO AND REMINDERS FROM THE TEACHER**

|  |  |
| --- | --- |
| **SUNDAY** |  |
| **MONDAY** |  |
| **TUESDAY** |  |
| **WEDNESDAY** |  |
| **THURSDAY** |  |
| **GENERAL** |  |

**MESSAGE FROM PARENTS**

*Please sign your child’s log book at the end of every week (Wednesday night/Thursday morning).*

Parent’s signature: Teacher’s signature:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date: |  | Term: |  | Week: |  |

**WHAT IS HAPPENING THIS WEEK?**

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