

Student Name _____ Date of Birth _____ SS# _____

Be a Better Reader

Levels	Date	Grade	Lesson #	Date Completed	Program Completed (Y/N)
Level A					
Level B					
Level C					
Level D					
Level E					
Level F					
Level G					

Reading in the Content Area

Levels	Date	Grade	Lesson #	Date Completed	Program Completed (Y/N)
Level A					
Level B					
Level C					
Level D					

Reasoning and Writing

Levels	Date	Grade	Lesson #	Date Completed	Program Completed (Y/N)
Level A					
Level B					
Level C					
Level D					

Expressive Writing

Levels	Date	Grade	Lesson #	Date Completed	Program Completed (Y/N)
Level I					
Level II					

