

September Response Journal

Help your child complete this page. Turn in this journal along with the calendar on the last school day of September.

Student

1. My favorite activity was _____.

I liked it because _____.

2. One activity I needed help with was _____.

3. I learned _____.

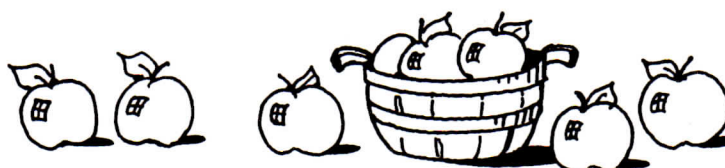


Parent

1. I learned _____.

2. The activity I most enjoyed doing with my child was _____.

3. The activity I helped my child with most was _____.



Parent's Signature _____