

**Albany Elementary School Summer Learning Challenge Name: \_\_\_\_\_ Grade: \_\_\_\_**

<p><b>Week 1</b> Check off each item when you complete it. Work on: ___ Lexia for 1 hour or Study Island ___ DreamBox 1 hour ___ Read Two Books 1. Title: _____ Author: _____ 2. Title: _____ Author: _____</p>	<p><b>Week 2</b> Check off each item when you complete it. Work on: ___ Lexia for 1 hour or Study Island ___ DreamBox 1 hour ___ Read Two Books 1. Title: _____ Author: _____ 2. Title: _____ Author: _____</p>
<p><b>Week 3</b> Check off each item when you complete it. Work on: ___ Lexia for 1 hour or Study Island ___ DreamBox 1 hour ___ Read Two Books 1. Title: _____ Author: _____ 2. Title: _____ Author: _____</p>	<p><b>Week 4</b> Check off each item when you complete it. Work on: ___ Lexia for 1 hour or Study Island ___ DreamBox 1 hour ___ Read Two Books 1. Title: _____ Author: _____ 2. Title: _____ Author: _____</p>
<p><b>Week 5</b> Check off each item when you complete it. Work on: ___ Lexia for 1 hour or Study Island ___ DreamBox 1 hour ___ Read Two Books 1. Title: _____ Author: _____ 2. Title: _____ Author: _____</p>	<p><b>Week 6</b> Check off each item when you complete it. Work on: ___ Lexia for 1 hour or Study Island ___ DreamBox 1 hour ___ Read Two Books 1. Title: _____ Author: _____ 2. Title: _____ Author: _____</p>

**My child has completed the work for the Summer Learning Challenge. Parent Signature: \_\_\_\_\_**