

		Day	Month	Date	Year	Date Test Due	
Subject	Assignments			Day			
<input type="checkbox"/> <input type="checkbox"/>							
Reading							
<input type="checkbox"/> <input type="checkbox"/>							
English/ L. Arts							
<input type="checkbox"/> <input type="checkbox"/>							
Spelling							
<input type="checkbox"/> <input type="checkbox"/>							
Math							
<input type="checkbox"/> <input type="checkbox"/>							
Science							
<input type="checkbox"/> <input type="checkbox"/>							
Social Studies							
<input type="checkbox"/> <input type="checkbox"/>							
Religion							
<input type="checkbox"/> <input type="checkbox"/>							

ANSR (Study Skills) • EANSR (No Study Skills)

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SAMPLE

Things to Take Home

1. _____
2. _____
3. _____

Daily Goals

1. _____
2. _____
3. _____

Things to Bring to School

1. _____
2. _____
3. _____

<p>Messages</p> <p>Signature(s)</p>
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