Junior High Reading Program
Form for Books In our Library

Name: ________________________________________
Homeroom: ____________
_______ Reading Program List      ________ Free choice
Title of Book: ___________________________________

Date book was read:  Month: ________ Year: ________

For Free choice books only:
Author: _______________________________________
Check One:  _____ Fiction  ______ YA  ______ YA78 ______ Nonfic ______ Bio

Student signature: ______________________________
Parent signature: _______________________________
Parent e-mail address: ________________________________________________

(A confirmation e-mail will be sent each time a form is received)

Book Rating
Please shade/check the number of stars you would give this book.

5=One of the best books I’ve ever read
4=A very good book
3=An okay book, mostly enjoyable
2=Not a very good book
1=I would not recommend this to anyone

(A confirmation e-mail will be sent each time a form is received)