Dear Family, Your child is learning to guess what will happen in a book before reading and check after reading.

- Read a book with your family. Write the title, author, and chapter(s) below.

  Title: _____________________________________________________

  Author: __________________________________________________

  Chapter(s): ______________________________________________

You are going to make predictions about your book. A prediction is a good guess about what will happen.
- Look through the chapter of your book before you read it with your family, and draw two columns on the back of this paper.
- On the left side of the page, write the heading Predictions. Before you read the chapter, write what you think will happen in the chapter(s) in the Predictions column.
- On the right side of the page, write the heading Reactions.
- After you finish reading the chapter(s), write what actually happened in the chapter(s) and what you thought of it in the Reactions column.
- How did making predictions help you understand the chapter(s) better?

________________________________________________________________________

________________________________________________________________________

Child’s signature ________________________________

Parent’s (Learning Partner’s) signature ________________

3/Reads and Comprehends Fiction at Grade Level/1
Dear Family, Your child is learning to answer questions about the setting of a book or story.

• Read the chapter(s) of your book with your family. Write the title, author, and chapter(s) below.

Title: _____________________________________________________
Author: __________________________________________________
Chapter(s): ______________________________________________

• Where does the part of the story told in the chapter(s) take place?

_________________________________________________________
_________________________________________________________
_________________________________________________________

• How do you know?

_________________________________________________________
_________________________________________________________
_________________________________________________________

• If this part of the story took place somewhere else or in a different time, how would the story likely change?

_________________________________________________________

Child’s signature __________________________________________
Parent’s (Learning Partner’s) signature __________________________
Dear Family, Your child is learning to ask questions while reading to understand the book or story better.

- Read the chapter(s) of your book with your family. Write the title, author, and chapter(s) below.

  Title: _____________________________________________________
  Author: __________________________________________________
  Chapter(s): ______________________________________________

- Stop after reading a few pages, and write what you have learned about the characters so far.

  __________________________________________________________
  __________________________________________________________

- As you think about the rest of the chapter(s), what do you think might happen to the characters?

  __________________________________________________________
  __________________________________________________________

- How do you think the chapter(s) will end?

  __________________________________________________________

- Continue reading until you finish the chapter(s).

Child’s signature ______________________________________________

Parent’s (Learning Partner’s) signature __________________________

3/Reads and Comprehends Fiction at Grade Level/3
Dear Family, Your child is learning to make connections between books and real life.

- Read the chapter(s) of your book with your family. Write the title, author, and chapter(s) below.

Title: _____________________________________________________
Author: __________________________________________________
Chapter(s): ______________________________________________

- What problems does the author present in the chapter(s) that are like real-life problems you have thought about or lived through?
  _________________________________________________________
  _________________________________________________________
  _________________________________________________________
  _________________________________________________________

- If the setting were changed to your neighborhood and the characters were your family and friends, how would the events in the chapter(s) have to change?
  _________________________________________________________
  _________________________________________________________
  _________________________________________________________
  _________________________________________________________

Child’s signature _____________________________________________
Parent’s (Learning Partner’s) signature ___________________________
Dear Family, Your child is learning to use information he or she already knows to understand a book or story.

- Read the chapter(s) of your book with your family. Write the title, author, and chapter(s) below.
  
  Title: _____________________________________________________
  Author: __________________________________________________
  Chapter(s): ______________________________________________

- Think about the books you have read or listened to this year.

- So far, is this book like any other book you have read or listened to? Please explain your answer.

________________________________________________________________________
________________________________________________________________________

- Think about the characters in this book. Are any of them like characters you have met in other books and stories?

________________________________________________________________________

- Have you noticed any patterns in the books you have read this year?

________________________________________________________________________

- Locate another book by the author of this book. Read it and see if the events and characters are similar.

Child’s signature ________________________________________________
Parent’s (Learning Partner’s) signature ____________________________