

Name _____ Date ____/____/____ # ____

Homework Complete Parent Signature _____

Weekly Spelling Homework Packet

Week of ____/____/____

Complete one page each day at home. Return completed packet on Friday. Do not use markers or pens. Handwriting must be neat.

Day	Assignment	✓
Monday	Word Two Times Each (pencil)	
Tuesday	Word Shapes (pencil and colored pencils or crayons)	
Wednesday	Word Sort (pencil)	
Thursday	Practice Test by Parent (pencil); Study for Friday's test.	
Friday	Return completed homework packet to school.	

Special Instructions

Homework Due Change: ____/____/____

Test Date Change: ____/____/____

Assignment Change: _____

Other: _____

Teacher Comments

Date: _____

Late

Incomplete

Handwriting (NI)

Follow Directions
