



Pizza Hut BOOK-IT! Reading Program

Verification form for the month of:

Oct. Nov. Dec. Jan. Feb. Mar.
Please circle month credit is to be given for.

Student Name: _____

Books I read this month. (8 required)

Number of pages.

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

Extra books I read this month.

9. _____

10. _____

11. _____

12. _____

For Parents: This verification form must be returned to school on or before the last school day of each month unless the teacher specifies another due date in writing. Parent signature is required for credit.

My child has read the books listed above during this month. I understand two homework grades will be given each month.

Parent signature: _____ **Date:** _____