

Figure 5.10. Sample Independent Reading Book Slips

General

Name: _____ Date: _____

Book title: _____

What did you like best about this book? _____

Fiction book

Name: _____ Date: _____

Book title: _____

What was the most important thing that happened in this story? Why was it important?

Nonfiction book

Name: _____ Date: _____

Book title: _____

What fact did you find most interesting in this book? _____