

Get Ready to Read! Kit Feedback Form

1. Age of Child(ren) using kit: _____
2. Please check all activities that you have done with your child.

Linguistic Awareness	Emergent Writing	Print Knowledge
___ Be an Expert Listener	___ Draw to the Music	___ Making a Menu
___ Find the Rhymes	___ Draw Your Day	___ My Favorite Book
___ How many Words?	___ I Can Write Letters	___ My Name has Letters
___ Match that Sound	___ Tell About Your Picture	___ The Reading Puppet
___ Be a Word	___ Walk on a Letter	___ Find a Word
___ Find the Compound	___ Build Your Name	___ Fishing for Letters
___ Words	___ Clay Letters	___ Name Memory
___ Jump for a Rhyme	___ Copy a Card	___ Word Puzzles
___ Mystery Sound	___ Sequence Story	___ Letter Memory
___ Rhyme-Out	___ Trace Your Name	___ My Word Box
___ First Sound Sort	___ Guess What's Inside	___ Pick a Letter
___ Stretched Out Story	___ Send a Message	___ Word Jump
___ What Word is Left?		

3. What was your general reaction to the *Get Ready to Read!* Kits?
4. What did you like best?
5. What did you like least?
6. Was there anything else you feel should have been included in the kits?
7. Would you be interested in checking out other *Get Ready to Read!* Kits?