Name: _____ Date: <u>8/21/17-8/25/17</u>

| Vocabulary: | | | | |
|--|--|--|--|--|
| Ached: To feel hurt or sore. | | | | |
| Concentrate: Thinking carefully about what | | | | |
| you are doing. | | | | |
| Discovery: Something that was hidden or | | | | |
| unknown is found. | | | | |
| Educated: A person has a great deal of | | | | |
| knowledge. | | | | |
| Effort: A person works hard to finish a task | | | | |
| | | | | |
| Improved: Becoming better at something. | | | | |
| Inspire: Encouraging a person to do something | | | | |
| good. | | | | |
| Satisfied: A person that is pleased with the way | | | | |
| something happened. | | | | |
| Sentence: A group of words that express a | | | | |
| complete thought. | | | | |
| Punctuation: Using conventional marks in | | | | |
| writing in order to make meaning clearer. | | | | |
| TEST/ Homework Due: 8/28/17 | | | | |

| Spelling: | Clap | Hand | Stamp | Glad | Snack | Click |
|------------------|------|------|-------|-----------------------------|------------------|-------|
| Sick | Miss | Pink | Lift | Test/ Homew Due: 8/28/17 | <mark>ork</mark> | |

Directions: Pick an activity from the above list every night. ONE for vocabulary and ONE for Spelling. Activities will be checked on a DAILY basis. **I will not accept late work!**

Activities:

| | Monday: | Tuesday | Wednesday | Thursday |
|-------------|---|--|--|--|
| Vocabulary: | Write sentences with vocabulary words. | Write each definition in your own words. | Create an illustration for each vocabulary word. | Write a story using four of your vocabulary words. |
| Spelling: | Write spelling words 3 types each | Write spelling words in silly writing. | Create a ladder with your spelling words. | Put spelling words in alphabetical order. |