Parent  Activity

Letter

**Today**, we recommend that you read the book “Button, Button, Who Got the Button?”, by Trish Holland. In school the children were working on sorting objects into categories.

**At home,** together with your child you can continue to learn about sorting by having them assist you in sorting the laundry. They can separate the socks into one pile, the white clothing into another pile and then put the colored clothing into a third pile. This activity teaches your child learning objective 13, uses classification skills and objective 20, Uses number concepts and operations.

**As an extension,** have your child count how many items of clothing are in each pile and encourage them to write that number down on the PAL.

***\*\*\*Please remember to read aloud to your child daily. We recommend reading a minimum of 3 hours a week with your child. ![MC900437791[1]]()***

**The PAL letters are developed to support your child’s academic/social emotional progress and related to the programs School Readiness goals.**

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rate this activity from 1-5, circle your rating (5= highest rating): **1 2 3 4 5**

Comments about the activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree that completing the at home activity and reading aloud to my child is equivalent to four hours volunteer time for the week.

**Parent’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Room: