

Name _____

Practice Chart May

Check the boxes indicating what you practiced each day. Practice Goal: 5 days per week for 15 minutes or more!

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
		1	2	3	4	5
		<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____
6	7	8	9	10	11	12
<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____
13	14	15	16	17	18	19
<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____
20	21	22	23	24	25	26
<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____
27	28	29	30	31		
<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essential Elements <input type="checkbox"/> Orchestra Music or Handouts <input type="checkbox"/> Private Lesson Music <input type="checkbox"/> Other: _____		

Grading*

- 21+ Days= A
- 14-22 Days= B
- 1-13 Days= C
- 0 Days= E
- No Signed Sheet= E

of Days Practiced _____ Grade Earned _____

Parent Signature _____

**Practice Sheets are due between June 1-7. Sheets turned in after June 7 will not be accepted since it will be the end of the school year!

Date:	What to Practice: