Test 1

Test 2

Test 3

**Your Goal**

0

100

200

300

400

500

600

700

800

900

1000

1100

1200

1300

1400

1500

1600

1700

Name:

Teacher:

|  |  |
| --- | --- |
| **Quarter** | **Lexile Score** |
| Test 1 |  |
| Test 2 |  |
| Test 3 |  |
| **Test 3 – Test 1 = Overall Growth**  My Overall Growth: \_\_\_\_\_\_\_\_\_\_\_\_ | |

|  |  |
| --- | --- |
| **Grade Level** | **SRI Lexile Score** |
| Grade 1 | 100-299 |
| Grade 2 | 300-499 |
| Grade 3 | 500-599 |
| Grade 4 | 600-699 |
| Grade 5 | 700-799 |
| Grade 6 | 800-849 |
| Grade 7 | 850-899 |
| Grade 8 | 900-999 |
| Grade 9 | 1000-1024 |
| Grade 10 | 1025-1049 |
| Grade 11 | 1050-1300 |

Resources

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