**Quarter 3 February 15th**

1. **Look** Look at the word 2. **Say** Say the word

3. **Cover** Cover the word 4. **Write** Write the word

5. **Check** Check that the word is correct

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| ***Spelling Words*** | Sunday | Monday | Tuesday | Wednesday |
| **1. my** |  |  |  |  |
| **2.first** |  |  |  |  |
| **3. water** |  |  |  |  |
| **4. bad** |  |  |  |  |
| **5. flat** |  |  |  |  |
| **6. grab** |  |  |  |  |
| **7. hear** |  |  |  |  |
| **8. rainbow** |  |  |  |  |
| Parent sign |  |  |  |  |

6. **Challenge yourself** Try writing a sentence with a different word each night

**Sight words : must new no**