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Teacher/Class	

**Grade 5 Instructional Benchmark Text Level Expectations** 

Month	Aug./ Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May/June
Expected Instructional Reading Level	S/T	T	Т	U	U	U	V	V	V

Indicate the student's Instructional Text Reading Level (Guided Reading Level) for each student.

Student Name	ELL	SPED	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June