How to support the Reading Recovery program

The program is most successful when the Reading Recovery teacher, the classroom teacher and the parents work together to help your child as he/she learns to read and write.

Choose a special place and time to work with your child each day. This shared time should be a happy part of the day.

Praise and encourage all the efforts your child makes when reading books and writing stories.

Reading at home

Your child will bring books home every day to practise reading.

Talk with your child about the books read.

Listen to your child read the books. This helps your child to practise reading.

If your child stops at a word, wait for a moment, he/she may work it out. If not, say the word so they will not forget what the story is about.

Writing at home

Your child will bring home an envelope with a cut up story in it to put back together and reread.

The cut up story is the sentence your child has written in the lesson that day.

Talk with your child about the story.

Read to your child the story written on the front of the envelope.

Let your child put the pieces of the story together.

Get your child to read the story back to you.

Please return the books to school each day
Your child and Reading Recovery

Reading Recovery is a school program offering special help to Year 1 students to become better readers and writers.

A trained Reading Recovery teacher works with your child for 30 minutes every day on an individual reading and writing program.

This is extra support to the classroom reading and writing program for Year 1 students.

A child may take part in the program for twelve to twenty weeks, so it is very important for your child to attend school every day.

Do you need to know more?

The Reading Recovery teacher will contact you to arrange a meeting for you to talk about your child’s interests and experiences. This helps the teacher to know more about your child. If you require an interpreter please inform the school.

You can contact your child’s Reading Recovery teacher

Name: __________________________

School Phone Number: ______________