

LEARNING LETTERS™ ASSESSMENT

Learner Name _____

DIRECTIONS

Record the dates of learner identification and use of letter names and sounds during naturally-occurring interactions with text.

	NAME	SOUND
A	Dates	Dates
B	Dates	Dates
C	Dates	Dates
D	Dates	Dates
E	Dates	Dates
F	Dates	Dates
G	Dates	Dates
H	Dates	Dates
I	Dates	Dates
J	Dates	Dates
K	Dates	Dates
L	Dates	Dates
M	Dates	Dates
N	Dates	Dates
O	Dates	Dates
P	Dates	Dates
Q	Dates	Dates
R	Dates	Dates
S	Dates	Dates
T	Dates	Dates
U	Dates	Dates
V	Dates	Dates
W	Dates	Dates
X	Dates	Dates
Y	Dates	Dates
Z	Dates	Dates

	NAME	SOUND
a	Dates	Dates
b	Dates	Dates
c	Dates	Dates
d	Dates	Dates
e	Dates	Dates
f	Dates	Dates
g	Dates	Dates
h	Dates	Dates
i	Dates	Dates
j	Dates	Dates
k	Dates	Dates
l	Dates	Dates
m	Dates	Dates
n	Dates	Dates
o	Dates	Dates
p	Dates	Dates
q	Dates	Dates
r	Dates	Dates
s	Dates	Dates
t	Dates	Dates
u	Dates	Dates
v	Dates	Dates
w	Dates	Dates
x	Dates	Dates
y	Dates	Dates
z	Dates	Dates