# My practice week

Name: _____ Week of: _____ Lesson day: _____

**MY PIECES (MY TEACHER WRITES THESE)**

1. _____ play it ____ times a day
2. _____ play it ____ times a day
3. _____ play it ____ times a day

Tick the box when you have played it enough times.

| | MON | TUE | WED | THU | FRI | SAT | SUN |
|---|---|---|---|---|---|---|---|
| Warm-up | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Piece 1 | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Piece 2 | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Piece 3 | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Sticker | ◯ | ◯ | ◯ | ◯ | ◯ | ◯ | ◯ |

The piece I liked best: _____

Something that was tricky: _____

I played for: ☐ my family ☐ a friend ☐ my toy

Grown-up's initials: _____

A question for my teacher: _____

Free template from sonely.co