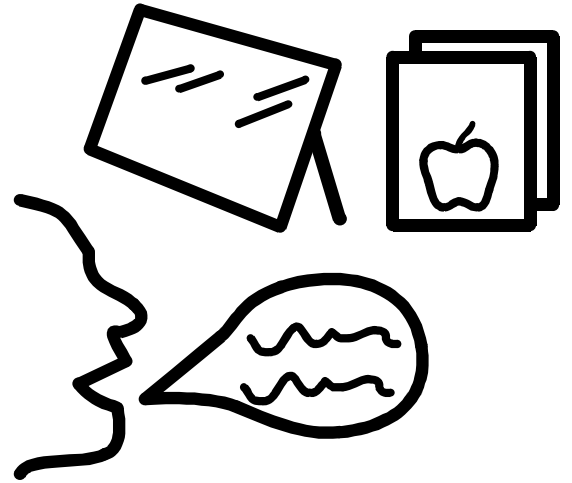


Speech Therapy



My name is _____.

I am in _____ grade.

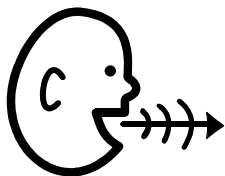
My speech therapist is _____.

I go to speech on _____.

My speech time is _____.

My goal for speech is to:

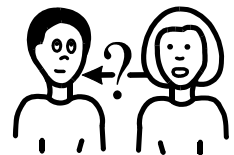
practice my sounds



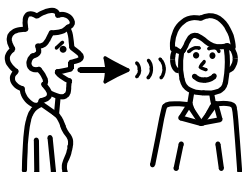
listen and follow directions



answer questions



have conversations



practice my sentences

