

Name: _____

Date: _____

Welcome to Fifth Grade!!

Supply Check Off List

1. Put your name on this sheet.
2. Check off the supplies that you have. If you do not have a supply, leave the line blank. For the supplies you did bring, list the number of the item you do have. If you brought more than the number listed, then write how many you brought.
*For example, if you bought 4 spiral notebooks, even though you only needed 2, please write 4.
3. If you already labeled your items, no problem! If you have not labeled things yet, **PLEASE WAIT to label!**

___ 1 Pack of copy paper

___ 4 Spiral Notebooks – single or
double- NO 5 subjects
please!

___ 5 Composition Notebooks

___ Pencil Sharpener (1)

___ Ruler (cm/in)

___ Calculator

___ Erasers (1 pack)

___ Highlighters (pack – several
colors)

___ Box of Markers (1 box)

___ Dry Erase Markers (1 pack)

___ Box of Crayons (1 box)

___ Pencil Bag (1 empty)

___ Package of #2 Pencils (2)

___ Box of Colored Pencils (1)

___ Glue bottle/glue stick – one of
each please (2)

___ Scissors (1 pair)

___ Tissue Boxes (2)

___ Earphones/earplugs for
personal use on computers.

(Please bring in a ziploc bag with
your name written on it).

___ USB Drive w/ lanyard – 2GB

(optional but highly
recommended)

Extras:

___ Gallon/Sandwich Ziploc
Baggies

___ Baby Wipes/Clorox Wipes

___ Sticky notes/Post its

___ Paper Towels

