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| **Lesson Plan for the week of**: ***Select Date*** | **Teacher:** ***Enter Teacher Name*** | **Subject:** ***Enter Subject*** | **Grade:** ***Choose Grade*** |
|  | **MONDAY** |  **TUESDAY** | **WEDNESDAY** | **THURSDAY** | **FRIDAY** |
| **Content Standard(s)** |  |
| **Bellwork (What students do upon entering your classroom)** |  |  |  |  |  |
| **Learning Target(s) (Objective)** |  |  |  |  |  |
| **Assessment (How will you know students met the learning target?)** |  |  |  |  |  |
| **Instructional Strategies** |  |  |  |  |  |
| **Guided Practice** |  |  |  |  |  |
| **Independent Practice** |  |  |  |  |  |