**School Name** **Classroom Number**

**Daily Lesson Plan** **Date**

|  |
| --- |
| **Greeting Time**Morning Messages (toddler classrooms): enter textBook to read aloud:enter text |
| **Planning/Recall** *Teacher 1**(for classrooms of children 24 months +)*Activity: enter textMaterials needed:enter textShort description: enter textIndividualization: enter text  | **Planning/Recall** *Teacher 2**(for classrooms of children 24 months +)*Activity: enter textMaterials needed:enter textShort description: enter textIndividualization: enter text |
| **Choice Time** Individualization: enter textClean up strategies: enter text |
| **Group Time with Materials** *Teacher 1*Activity: enter textGoal:  Materials needed: enter textSteps: enter textIndividualization:

|  |  |  |
| --- | --- | --- |
| Earlier | Middle | Later |
| enter text | enter text | enter text |

Transition out: enter text | **Group Time with Materials** *Teacher 2*Activity: enter textGoal: Materials needed: enter textSteps: enter textIndividualization:

|  |  |  |
| --- | --- | --- |
| Earlier | Middle | Later |
| enter text | enter text | enter text |

Transition out: enter text |
| **Music and Movement Group Time**Activity: enter textGoal: Materials needed: enter textSteps: enter textIndividualization: enter textTransition out: enter text |
| **Outside Time(s)/Gross Motor**Materials needed: enter textTransition: enter text |
| **Bodily Care:** enter text**Meals:** enter text |
| **Breathing Techniques/Conscious Discipline strategies:** enter text |
| **Departure:** enter text |

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