



NOT FOR REPLICATION

 School Specialty
Planning & Student Development

LESSON
PLAN

.....
www.schoolspecialty.com • 1.888.388.3224

Substitute Information

SCHOOL SCHEDULE

School Begins

A.M. Break

Lunch

School Resumes

P.M. Break

Dismissal

CLASSROOM SCHEDULE

Class Begins

No. of Students

Class Ends

Lunch Time

Lunch Count

GET HELP FROM

Teacher(s)

Student(s)

Secretary

Principal

Counselor

Nurse

Custodian

Transportation

DISCIPLINE PROCEDURES

DISMISSAL PROCEDURES

EMERGENCY PROCEDURES

DISASTER PROCEDURES

HEALTH/MEDICAL INFORMATION

Student(s) with Special Needs

Nurse Schedule

First Aid

AUDIO-VISUAL EQUIPMENT PROCUREMENT PROCEDURES

NOTES

Seating Plans

CLASS _____ PERIOD _____ ROOM _____

CLASS _____ PERIOD _____ ROOM _____

CLASS _____ PERIOD _____ ROOM _____

CLASS _____ PERIOD _____ ROOM _____

NOT FOR REPLICATION

Seating Plans

CLASS _____ PERIOD _____ ROOM _____

CLASS _____ PERIOD _____ ROOM _____

CLASS _____ PERIOD _____ ROOM _____

CLASS _____ PERIOD _____ ROOM _____

NOT FOR REPLICATION

Student Roster

STUDENT NAMES	PARENT/GUARDIAN NAMES	HOME PHONE	WORK PHONE
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			

NOT FOR REPLICATION

Parent Conferences

ADDRESS	DATE/TIME	DATE/TIME	COMMENTS
			1
			2
			3
			4
			5
			6
			7
			8
			9
			10
			11
			12
			13
			14
			15
			16
			17
			18
			19
			20
			21
			22
			23
			24
			25
			26
			27
			28
			29
			30
			31
			32
			33
			34
			35
			36
			37
			38
			39
			40

NOT FOR REPLICATION

NOT FOR REPLICATION

OVERVIEW PLANNING

(Date)

thru

(Date)

(Date)

thru

(Date)

(Date)

thru

(Date)

(Date)

thru

(Date)

NOT FOR REPLICATION

OVERVIEW PLANNING

<p>(Date)</p> <p>thru</p> <p>(Date)</p>	
<p>(Date)</p> <p>thru</p> <p>(Date)</p>	
<p>(Date)</p> <p>thru</p> <p>(Date)</p>	
<p>(Date)</p> <p>thru</p> <p>(Date)</p>	

NOT FOR REPLICATION

Schedule of School Events

Year:

DATE	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												

NOT FOR REPLICATION

NOT FOR REPLICATION

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

LESSON PLANS

Week Beginning _____

Ending _____

SUBJECT	MONDAY	Date	TUESDAY	Date	WEDNESDAY	Date
Period						
Period						
Period						
Period						
Period						
Period						
Period						

NOT FOR REPLICATION

LESSON PLANS

Week Beginning _____

Ending _____

SUBJECT	MONDAY	Date	TUESDAY	Date	WEDNESDAY	Date
Period						
Period						
Period						
Period						
Period						
Period						
Period						

NOT FOR REPLICATION

NOT FOR REPLICATION

1473693

LESSON PLAN BOOK

- 7 SUBJECT/PERIODS
- 40 WEEKS

