

Lesson Plan Format

NAME:	GRADE:
COOPERATING TEACHER:	SUBJECT:
SCHOOL:	DATE:
ROOM NUMBER:	PERIOD:
LEARNING GOALS RELATED TO COMMONWEALTH OF PA STANDARDS AND ANCHORS:	
OBJECTIVES:	
MATERIALS AND EQUIPMENT:	
PROCEDURES:	
ADAPTATIONS & ACCOMMODATIONS (when applicable):	
ASSESSMENT:	
ASSIGNMENT:	