

WEEKLY PLANNING FORM

Week of: _____

Special Focus _____

| | | | |
|-----------------------------------|--------------|--------------|-----------------|
| Changes to the environment | Housekeeping | Art | Sensory |
| | Blocks | Manipulative | Books and Quiet |

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|---|--------|---------|-----------|----------|--------|
| Group Time *Songs *Stories *Games | | | | | |
| Outdoor or Large Muscle | | | | | |