

After School Weekly Lesson Plan

Week Of: _____

Outcome Focus: _____

Program Element/Time	Activities				
	Monday	Tuesday	Wednesday	Thursday	Friday
Snack time					
Group meeting					
Physical Activity/outside time					
Choice Structured Activities (at least 3)					
Closing activities					
Special events					

Interest Area/Environmental Changes

Quiet/Cognitive area	Arts & Crafts	Manipulate	Games
Hang Space	Dramatic Play	Other:	Other:

Supplies/Logistics and Follow-up

Field Trip

Date: _____

Destination: _____

Mode of Transportation: _____

Departure time: _____

Arrival at destination: _____

Return time: _____

Cost: _____

Method of payment needed: _____

Contact name: _____

Phone: _____

Supplies on hand needed

(Indicate quantity)

Supplies to purchase—

(indicate exact quantity, color and brand if essential)

Equipment Needed—

(appliances, tools, cooking utensils, electronics & day needed)

Please attach all activity plans and instructions.

Child/Children to observe

Observations/Issues to Discuss

Assessment of Week—How did it go?