Weekly Activity Plan
(Plans are Flexible)

ECI: ____________________________

Name of ECPs _______________________

Week of: ________ Duration: ________________

Age Group: _______________________

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<th>Learning Outcomes</th>
<th>Monday</th>
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<td>Wellness</td>
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<td>Effective Communication</td>
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<td>Valuing Culture</td>
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<td>Intellectual Empowerment</td>
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<td>Respect for self, others and the environment</td>
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<td>Resilience</td>
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Daily Activity Plan

Learning Outcome:

Title of Activity:

Age:

Date:

Duration:

Developmental Objectives: If provided with the appropriate environment infants will:

Materials Needed:

Steps for Interacting with and Supporting Children:

Introduction:

Step 1:

Step 2:

Step 3:

Reflection (Look, Listen, Note!): Were infants able to:

For the Practitioner: In this section, record all responses observed while you look, listen and make note of each infant’s responses to the steps taken in achieving the suggested learning objective. If the infant does not master the skill, continue to implement the activity and record the anecdotal observation.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Parent Involvement: