

LESSON PLAN  
**CONTENT/SUBJECT: ADAPTIVE/DAILY LIVING**

RELATED TO IEP OBJECTIVE: \_\_\_\_\_

MONTH: _____ DATE/WEEK OF: _____	<u>CORE STANDARD:</u>
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<u>KEY VOCABULARY:</u>	<u>KEY SKILLS:</u>
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<u>CURRICULUM (S)</u> (Check those that apply): Grade Level Text ___                      BCP ___ Cooking-To-Learn ___ Conversation Skills ___ Life Skills Portfolio ___ Other: _____ _____	<u>MATERIALS</u> (List those that apply): Manipulatives: _____  Student Sheet/Book (page) _____ Other: _____ _____ _____
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Student Specific Adaptations:	Assistive Technology Devices:
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<u>TASK 1:</u> _____ <u>Steps:</u>	
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<u>PROGRESS MONITORING/EVALUATION</u> (Check those that apply):			
Observation ___	Checklist ___	Independent Participation ___	Prompted Participation ___
Attached data sheet ___	Other _____		