

## Cover Page for Final Set of Lesson Plans

Printed Student Name: \_\_\_\_\_

Date Due: \_\_\_\_\_ Date Turned In: \_\_\_\_\_

### Minimum Criteria -- Student Check List

- \_\_\_\_\_ I have not turned in this assignment (or significant portions of this assignment) for a grade in another course.
- \_\_\_\_\_ I turned in a detailed weekly schedule.
- \_\_\_\_\_ I turned in a complete weekly set of lesson plans.
- \_\_\_\_\_ My weekly schedule and lesson plans are typed.
- \_\_\_\_\_ I used the lesson plan format provided in class or an equivalent format approved by the course instructors.
- \_\_\_\_\_ All of my lesson plans included all ten required components.
- \_\_\_\_\_ I developed the lesson plans myself -- I did not copy them out of a book or from the internet.
- \_\_\_\_\_ I clearly indicated all resources I used to develop the lesson plans (including materials or assessment tools), such as with a footnote.
- \_\_\_\_\_ I included the content area and age/grade level for which the lessons were developed.

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Student Signature

**Instructor Grading Criteria -- INSTRUCTOR Check list**

\_\_\_\_\_ All minimum criteria have been met. (7 points)

\_\_\_\_\_ The lesson plans are very coherent -- all of the pieces fit together well and the order is clear and appropriate. (1 pt)

\_\_\_\_\_ Modifications/accommodations for a variety of learners were appropriate. (1 pt)

\_\_\_\_\_ The assessment methods described in your lesson plans were appropriate, thorough, and will provide rich documentation of student learning, behavior, and/or the classroom learning context. (1 pt)

Comments:

Final Grade: \_\_\_\_\_ out of 10 points.