Small Group Roster & Planning

Group Topic: _____ **Meeting Day/Time:_____**

Student Name	Teacher	PS	1	2	3	4	5	6	7	8

Session 1 Date: _____ **Topic:**_____ **Logged** ____

Materials Needed: _____

Lesson/Activity:_____
_____
_____

Notes: _____

Session 2 Date: _____ **Topic:**_____ **Logged** ____

Materials Needed: _____

Lesson/Activity:_____
_____
_____

Notes: _____

Session 3 Date: _____ **Topic:**_____ **Logged** ____

Materials Needed: _____

Lesson/Activity:_____
_____
_____

Notes: _____

Session 4 Date: _____ **Topic:** _____ **Logged** _____

Materials Needed: _____

Lesson/Activity: _____
_____
_____

Notes: _____

Session 5 Date: _____ **Topic:** _____ **Logged** _____

Materials Needed: _____

Lesson/Activity: _____
_____
_____

Notes: _____

Session 6 Date: _____ **Topic:** _____ **Logged** _____

Materials Needed: _____

Lesson/Activity: _____
_____
_____

Notes: _____

Session 7 Date: _____ **Topic:** _____ **Logged** _____

Materials Needed: _____

Lesson/Activity: _____
_____
_____

Notes: _____

Session 8 Date: _____ **Topic:** _____ **Logged** _____

Materials Needed: _____

Lesson/Activity: _____
_____
_____

Notes: _____