



PRESCHOOL TEACHER'S PLANNER

By Rimsha Nasir

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ASSESSMENT



Student Name

- I.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
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ATTENDANCE LOG



NAME

- 1.
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BIRTHDAYS



JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER

2021



JANUARY

Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
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FEBRUARY

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MARCH

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MAY

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JUNE

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AUGUST

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SEPTEMBER

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NOVEMBER

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DECEMBER

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2021

Calendar



January

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February

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March

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April

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May

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June

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July

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August

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September

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October

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November

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December

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2022



JANUARY

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FEBRUARY

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MARCH

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APRIL

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MAY

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JUNE

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JULY

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AUGUST

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SEPTEMBER

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OCTOBER

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NOVEMBER

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DECEMBER

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2022



Calendar

JANUARY

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FEBRUARY

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MARCH

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JUNE

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JULY

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AUGUST

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SEPTEMBER

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OCTOBER

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NOVEMBER

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DECEMBER

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2023



January

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February

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March

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April

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May

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June

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July

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August

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September

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October

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November

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December

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17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

Class Schedule



MON

TUE

WED

THU

FRI

SAT



CLASS SCHEDULE

TIME	ACTIVITY



Class Directory

Name:

Address:

Contact Number:

Email Address:

Name:

Address:

Contact Number:

Email Address:

Name:

Address:

Contact Number:

Email Address:

Name:

Address:

Contact Number:

Email Address:

Name:

Address:

Contact Number:

Email Address:

Name:

Address:

Contact Number:

Email Address:



CLASSROOM



PROJECT PLAN

	PHASE I	PHASE II	PHASE III
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			

[illegible]


Teacher's Planner by Rimsha Nasir
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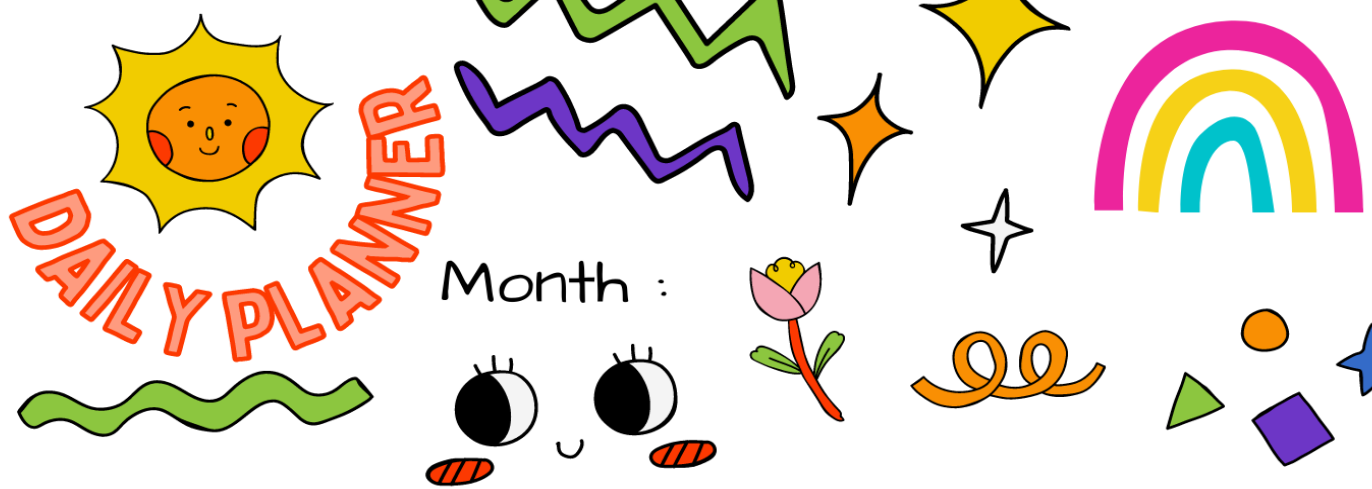
Daily Chore Chart

TO DO'S FOR TODAY

☐	_____	☐	_____
☐	_____	☐	_____
☐	_____	☐	_____
☐	_____	☐	_____

PLANS FOR TOMORROW

MY MOTIVATION



Mon

Tue

Wed

Thu

Fri

Sat

Sun

Notes

To Do :



DAILY PLANNER

DATE

TODAY'S SCHEDULE

6-7 AM	
7-8 AM	
8-9 AM	
9-10 AM	
10-11 AM	
11-12 AM	
12-1 PM	
1-2 PM	
2-3 PM	
3-4 PM	
4-5 PM	
6-7 PM	
7-8 PM	
8-9 PM	

TOP PRIORITIES

TO DO LIST..

FOR TOMORROW..

NOTE..

Daily Planner



To do list

Date:

Important tasks

Reminders

Personal notes

Accomplished

DIFFERENTIATION



SUPPORT

CORE

DIFFERENTIATION



Emergency Contacts



Student's Emergency Contact Information

Name :

Number :

Address :

Emergency Contact :

Student's Emergency Contact Information

Name :

Number :

Address :

Emergency Contact :

Student's Emergency Contact Information

Name :

Number :

Address :

Emergency Contact :

HELPFUL HINTS



CLASS OVERVIEW

BEHAVIOR

NOTES

IMPORTANT DATES



Date	Description

LESSON PLAN



SUBJECT

CURRICULUM LINKS

RESOURCES

LEARNING SEQUENCE

DIFFERENTIATION



Lesson Plan

Grade:

Subject:

Date:

Topic:

Lesson #

Lesson Focus and Goals:

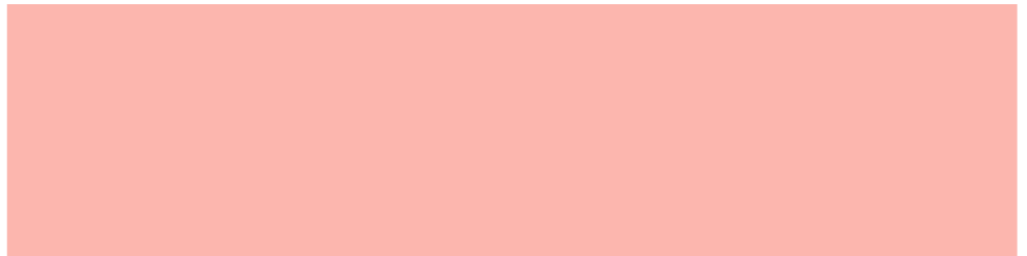
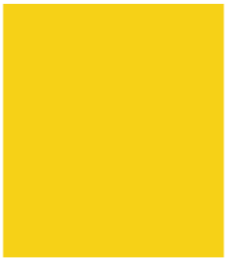
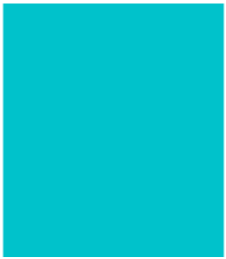
Materials Needed:

Learning Objectives:

Structure / Activity:

Assessment:

MATH GROUPS



MEAL PLANNER



DATE : _____

MONDAY

B

L

D

S

THURSDAY

B

L

D

S

TUESDAY

B

L

D

S

FRIDAY

B

L

D

S

WEDNESDAY

B

L

D

S

SATURDAY

B

L

D

S

MONTHLY PLANNER



Date: _____

notes:

[illegible][illegible]

MONTHLY PLANNER



Date: _____

notes:

thu	fri	sat

MONTHLY PLANNER



Date: _____

notes:

[illegible][illegible]



MONTHLY PLANNER

DAY



SUNDAY	MONDAY	TUESDAY	WEDNESDAY



MONTHLY PLANNER

DAY



THURSDAY

FRIDAY

SATURDAY



MONTHLY PLANNER

DAY



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY



Month

MONTHLY PLANNER

Sun

Mon

Tue

Wed





Month

MONTHLY PLANNER

Thu

Fri

Sat





Month

MONTHLY PLANNER

Sun

Mon

Tue

Wed

Thu

Fri

Sat



- ☐
- ☐
- ☐
- ☐
- ☐



MY PLANNER



NAME

SCHOOL

YEAR

GRADE

PHONE

E-MAIL

NOTES



NOTES



Twelve horizontal grey bars for writing notes.



My Notes



PUBLIC
DOMAIN



PRESCHOOL

PROGRESS REPORT

Student's Name: _____

Level: _____

Teacher: _____

Academic Progress

Personal and Social Progress

Grading System:

A - Exemplary
B - Proficient
C - Progressing
D - Not yet meeting
standard

Teacher's feedback

--

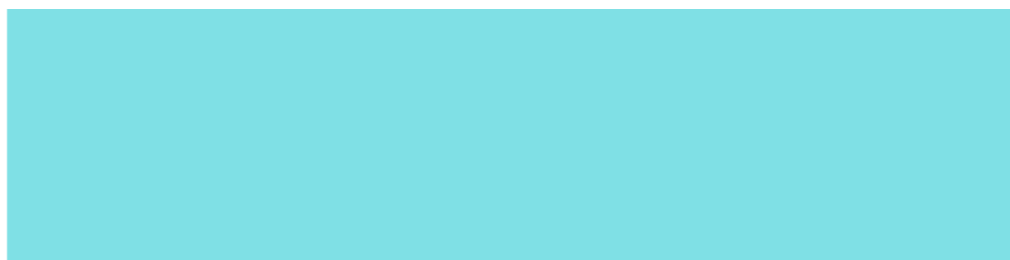
PROFESSIONAL LEARNING



DATE

LEARNING FOCUS

READING GROUPS





**PUBLIC
DOMAIN**



STUDENT'S INFORMATION



Name:

Age & Birthday:

Home Address:

Contact Number/s:

Email:

Guardian's Name:

Contact Number/s:

Name:

Age & Birthday:

Home Address:

Contact Number/s:

Email:

Guardian's Name:

Contact Number/s:

Name:

Age & Birthday:

Home Address:

Contact Number/s:

Email:

Guardian's Name:

Contact Number/s:

Name:

Age & Birthday:

Home Address:

Contact Number/s:

Email:

Guardian's Name:

Contact Number/s:



STUDY PLANNER

	MORNING	AFTERNOON	EVENING
SUNDAY			
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			



TOPIC

MEETING OBJECTIVES

ATTENDEES

NOTES

TIMETABLE

WEEK

1



2



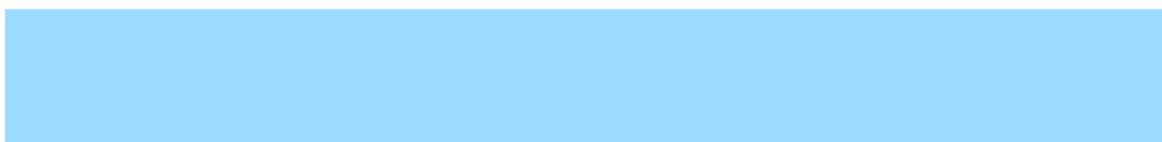
3



4



5



6



7



8



TO DO LIST



1

2

3

4

5

6

7

8

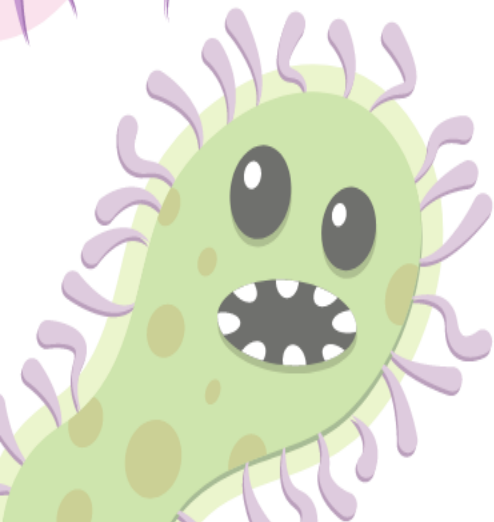
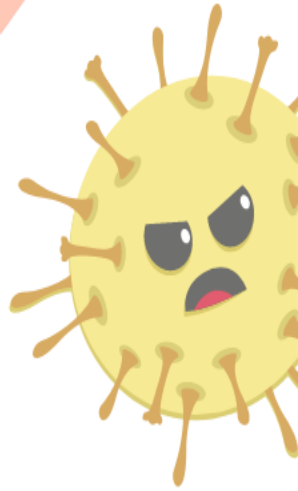
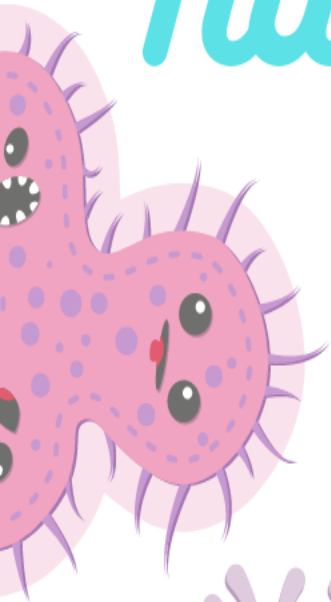
9

10

WASH YOUR HANDS



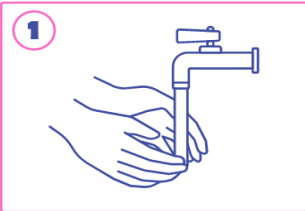
- 1 Wet your hands
- 2 Apply soap
- 3 Vigorously rub soap
- 4 Clean your hands, wrists, between your fingers and under your fingernails
- 5 Rinse under running water
- 6 Dry your hands



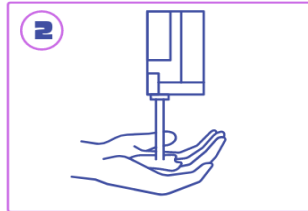


WASH YOUR HAND

WITH SOAP & WATER



1
Wet your hands
with water



2
Apply a sufficient amount of
soap on all hand surfaces



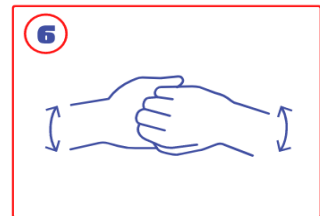
3
Rub hands palm
to palm



4
Place the right palm over the
left dorsum with interlaced
fingertips and vice versa



5
Rub palm to palm with
finger interlaced



6
Rub opposite palms with
the backs of the
fingertips interlocked



7
Rotational rubbing of the left
thumb clasped in the right
hand, and vice versa



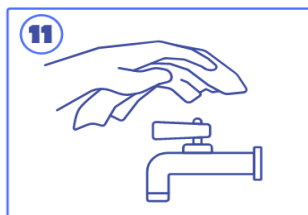
8
Back and forth rotational
rubbing of clasped fingers of
the right hand in the left palm
and vice versa



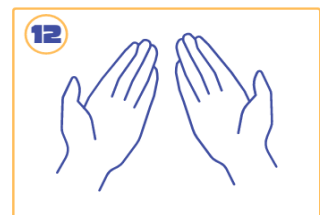
9
Rinse hands
with water



10
Use a single-use towel to dry
your hands properly



11
Turn off the faucet
using a towel



12
Well done! Your
hands are safe now



PREVENT THE SPREAD OF CORONA VIRUS



**PLEASE USE
HAND SANITIZER
BEFORE ENTERING**



Weekly Planner

WEEK OF _____

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

SUNDAY

PRIORITIES

-
-
-
-

TO DO

NOTES

Notes area with a dotted background.

WEEKLY PLANNER



MONDAY

Activities

TUESDAY

Objectives

WEDNESDAY

THURSDAY

FRIDAY

Notes

WEEKLY PLANNER



M

T

W

T

F



Week

WEEKLY PLANNER



Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

To Do



Tracker



Notes:



WEEKLY REWARD CHART



This week I promise to...



S M T W T F S

Eat my vegetables

☐	☐	☐	☐	☐	☐	☐
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Put my toys away

☐	☐	☐	☐	☐	☐	☐
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Recite the alphabet

☐	☐	☐	☐	☐	☐	☐
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Go to school happy

☐	☐	☐	☐	☐	☐	☐
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Go to bed on time

☐	☐	☐	☐	☐	☐	☐
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

My reward for the week is _____



WEEKLY REWARD CHART

This chart belongs to:

My stars for the week:

MON

TUES

WED

THURS

FRI

I put away my toys.

I cleared my desk.

I listened to my teacher.

I helped tidy up the classroom.

I participated in class.

WEEKLY TO DO'S



DATE : _____

MONDAY

- ☐ _____
- ☐ _____
- ☐ _____

FRIDAY

- ☐ _____
- ☐ _____
- ☐ _____

TUESDAY

- ☐ _____
- ☐ _____
- ☐ _____

SATURDAY

- ☐ _____
- ☐ _____
- ☐ _____

WEDNESDAY

- ☐ _____
- ☐ _____
- ☐ _____

SUNDAY

- ☐ _____
- ☐ _____
- ☐ _____

THURSDAY

- ☐ _____
- ☐ _____
- ☐ _____

NOTES

- ☐ _____
- ☐ _____
- ☐ _____



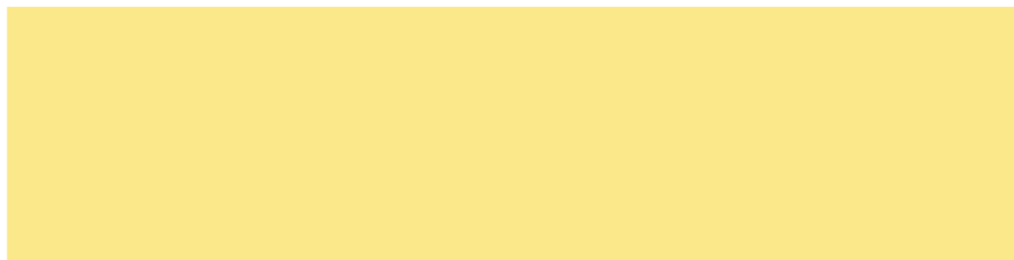
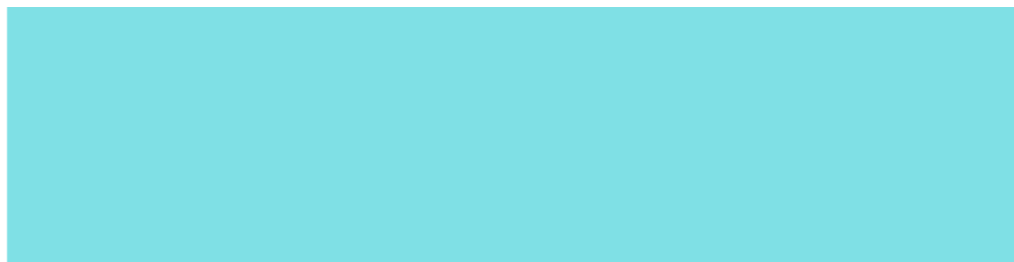
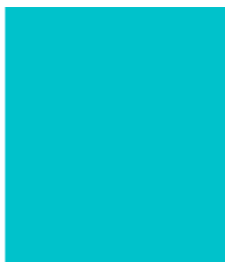
WELCOME

Back to

SCHOOL



WRITING GROUPS





Year:

YEAR PLANNER

January

February

March

April

May

June



July



August

September

October

November

December



YEARLY GOALS



JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER