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| **Teacher:**  | **Subject:**  | **Date:**  |
| **Grade:**  | **Period:**  |
| ***GLE #(s):***  | ***LCC Unit Name and #:***  | ***LCC Activity #:***  |
| **Objective(s)** | **Learner can:** |
| **Materials** |  |
| **Accommodations** |  |
| **IEP Goals Used** |  |
| **Collaboration with SPED Teacher/Para** |  |
| **Interventions** |  |
| **Enrichment** |  |
| **Bell ringer** |  |
| **Assessment**  |  |
| **Higher Order Thinking Questions** |  |
|  |  |  |
| **Introduction, Set or Hook** |  |  |
| **Modeling (I DO)** |  |  |
| **Guided Practice (WE DO)** |  |  |
| **Independent Practice (YOU DO)** |  |  |
| **Closure (Checking for Understanding)** |  |  |
|  |
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| **Group 1 Students** |  |
| **Visual Learners** |
| **Group 2 Students** |  |
| **Technological Learners** |
| **Group 3 Students** |  |
| **Musical Learners** |
| **Group 4 Students****Tactile & Kinesthetic Learners** |  |
| **Teacher Group:**  |  |

 |
| **Things to remember :** | **Things to change** |