

Goals

Child's Name: _____

1. _____

Parent's Signature _____

2. _____

Parent's Printed Name _____

3. _____

Teacher's Signature _____

4. _____

April 2006

Sun	Mon	Tue	Wed	Thu	Fri	Sat
Sample: #1 = 20 min #3 = 15 min						1 1 2 3 4
2 1 2 3 4	3 1 2 3 4	4 1 2 3 4	5 1 2 3 4	6 1 2 3 4	7 1 2 3 4	8 1 2 3 4
9 1 2 3 4	10 1 2 3 4	11 1 2 3 4	12 1 2 3 4	13 1 2 3 4	14 1 2 3 4	15 1 2 3 4
16 1 2 3 4	17 1 2 3 4	18 1 2 3 4	19 1 2 3 4	20 1 2 3 4	21 1 2 3 4	22 1 2 3 4
23/30 1 2 3 4	24 1 2 3 4	25 1 2 3 4	26 1 2 3 4	27 1 2 3 4	28 1 2 3 4	29 1 2 3 4



April 2006



Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6 Policy Council 6pm EHS closes @ noon	7	8 Week of the Young Child Activities @ Holiday Village
9	10	11	12	13 EHS closes @ noon	14 HS closed	15
16 EASTER	17 HS Closed	18 HS class day	19 HS LAP Testing No classes	20 HS LAP Testing No classes EHS closes @ noon	21 HS LAP Testing No classes EHS closed	22
23/30	24	25 Early Childhood Screen- ing Birth- 2 years old Chinook Family Night 5:30	26 Early Childhood screen- ing & kindergarten regis- tration	27 ECS & kindergarten registration EHS closes @ noon Havre Family Night 5:30	28 EC Screening & kindergarten regis- tration	29