

Goals

1. _____
2. _____
3. _____
4. _____

Child's Name: _____

Parent's Name (printed) _____

Parent's Signature

Teacher's Signature

July 2006

Sun	Mon	Tue	Wed	Thu	Fri	Sat
<i>Sample:</i> #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	24/31 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



July 2006



Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23/30	24/31	25	26	27	28	29