

Title I Tutoring Lesson Plan



School Name _____

Tutor Name _____



Monday – Date Time:	Tuesday – Date Time:	Wednesday – Date Time:	Thursday – Date Time:	Friday – Date Time:
Students	Students	Students	Students	Students
Student Accommodations (IEP/504/RTI)	Student Accommodations (IEP/504/RTI)	Student Accommodations (IEP/504/RTI)	Student Accommodations (IEP/504/RTI)	Student Accommodations (IEP/504/RTI)
Content Area:	Content Area:	Content Area:	Content Area:	Content Area:
Skill(s):	Skill(s):	Skill(s):	Skill(s):	Skill(s):
Resources/Materials:	Resources/Materials:	Resources/Materials:	Resources/Materials:	Resources/Materials:
Strategies/Lesson Activities:	Strategies/Lesson Activities:	Strategies/Lesson Activities:	Strategies/Lesson Activities:	Strategies/Lesson Activities:
Date Progress Shared with Content Teacher(s)				

Tutor Signature: _____

Director's Signature: _____