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| --- | --- | --- | --- | --- | --- |
|  | **Day 1**  Using Envisions Topic Planner  Centers Day | **Day 2**  Using Envisions Topic Planner  Centers Day | **Day 3**  Using Envisions Topic Planner  Centers Day | **Day 4**  Using Envisions Topic Planner  Centers Day | **Day 5**  Using Envisions Topic Planner  Centers Day |
| Essential Question |  |  |  |  |  |
| Learner Outcome |  |  |  |  |  |
| Home Learning |  |  |  |  |  |
| Vocabulary | | | | | |
| Agenda  (if using Envisions Topic Planner, write topic and lesson numbers here) |  |  |  |  |  |
| Leveled Activities:  Intervention-  On-Level-  Advanced- |  |  |  |  |  |

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| **ESOL/ESE**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Student** | **ESOL** | **Student** | **ESE** | **Student** | **Gifted** | |  | Choose an item. |  | Choose an item. |  | Choose an item. | |  | Choose an item. |  | Choose an item. |  | Choose an item. | |  | Choose an item. |  | Choose an item. |  | Choose an item. | |  | Choose an item. |  | Choose an item. |  | Choose an item. | |  | Choose an item. |  | Choose an item. |  | Choose an item. | | **Teacher Notes :**  **Centers (when used for review)**  **Hands on:**  **Drawings and Diagrams:**  **Paper/Pencil:**  **Teacher Led:** |