

**Elementary School Distance Learning Plan for School Closure**

Student Name: \_\_\_\_\_ Homeroom: \_\_\_\_\_

	Monday, Apr 27th	Tuesday, Apr 28 <sup>th</sup>	Wednesday, Apr 29 <sup>th</sup>	Thursday, Apr 30 <sup>th</sup>	Friday, May 1 <sup>st</sup>
<b>English Language Arts</b>					
<b>Math</b>					
<b>Religion</b>					
<b>Science</b>					
<b>Social Studies</b>					
<b>Auxiliary / Elective</b>					
<b>P.E. / Physical Activity</b>					
<b>Total Time spent on Classwork</b>					
<b>Student Signature</b>					
<b>Parent Signature</b>	<i>By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.</i>	<i>By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.</i>	<i>By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.</i>	<i>By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.</i>	<i>By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.</i>