

Elementary School Distance Learning Plan for School Closure

Student Name: _____ Homeroom: _____

	Monday, Apr 20 th	Tuesday, Apr 21 st	Wednesday, Apr 22 nd	Thursday, Apr 23 rd	Friday, Apr 24 th
English Language Arts					ENRICHMENT DAY
Math					
Religion					
Science					
Social Studies					
Auxiliary / Elective					
P.E. / Physical Activity					
Total Time spent on Classwork					
Student Signature					
Parent Signature	By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.	By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.	By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.	By signing, I verify that my student used the above number of minutes to complete their assignments, and it was completed independently when required.	