# Model Lesson Plan: ......................................

School Name: ………………………………… Teacher’s name: ………………….……

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Term | Date | Subject | Class | Unit No | Lesson No | Duration | Class size |
|  |  |  |  |  |  |  |  |
| Type of Special Educational Needs to be catered for in this lesson and number of learners in each category | 1 learner with partial hearing impairment) |
| Unit title |  |
| Key Unit Competence |  |
| Title of the lesson |  |
| Instructional Objective |  |
| Plan for this Class (location: in / outside) |  |
| Learning Materials (for all learners) |  |
| References |  |