

Field Lesson Implementation Plan for PNP Schools

Name of School _____ Date _____

Title of Field Lesson _____

Grade Levels _____ Date of Field Lesson _____

Number of Students _____ Number of Teachers _____ Number of Chaperones _____

INSTRUCTIONAL OBJECTIVES

ACTIVITIES

Prior to the Field Lesson:

During the Field Lesson:

Following the Field Lesson:

EVALUATION OF LEARNING

Signature of Teacher

Signature of Principal