

## Appendix E2: Career and Technical Education Lesson Plan Template

(Note: if you need more space to complete any item, please use the Teacher Notes section.)

### \*Teacher Responsibility

Program:  Unit:   
Educator:  Date:   
Lesson Plan Title:

### OBJECTIVE

NYS Teaching Standard	Danielson Domain and Component
2.1, 2.2, 2.4, 3.3	1A, 1C, 1E, 2B

I. What students will be able to do and/or know by the time students leave the class.

II. Content (Skills, Knowledge, Competencies and Standards)

Place an X in front of the curricular elements taught in this lesson

 B&I ELA Math CFM WRS

**ACTIVITY/STRATEGY**

NYS Teaching Standard	Danielson Domain and Component
2.2, 2.3, 2.4, 2.5, 2.6, 3.1, 3.3, 3.4, 3.5	1A, 1C, 1D, 1E, 2B, 3B, 3C, 3D

I. How (method) you will teach your lesson.

II. Strategy for delivery, practice to achieve the objective, reinforce concepts, knowledge, skills and competencies you want them to learn.

## **ASSESSMENT**

NYS Teaching Standard	Danielson Domain and Component
2.4, 3.6, 5.1, 5.2, 5.5	1C, 1F, 3D

I. Now - before the session has ended.

II. Later - in the long run (i.e., weekly, unit and final exams).

**Assessment Codes:**   **Q** = Quiz   **T** = Test   **C**=In-Class Assignments   **P** = Project  
**H/J**=Homework/Journal

## MATERIALS/TECHNOLOGY

NYS Teaching Standard	Danielson Domain and Component
1.1, 1.3, 1.6, 2.3, 2.6, 3.4, 3.5, 4.3, 4.4	1B, 1D, 1E, 2C, 2D, 2E, 3B, 3C

## IEP ACCOMMODATIONS/MODIFICATIONS

Place an X in front of each accommodation/modification that will be employed during this lesson as per the *IEP-504 Matrix*

<input type="checkbox"/> Read directions	<input type="checkbox"/> Individually tested in separate location	<input type="checkbox"/> Copy of notes	<input type="checkbox"/> Writing below grade level
<input type="checkbox"/> Simplify directions	<input type="checkbox"/> Extended time for tests	<input type="checkbox"/> Materials in alternative formats	<input type="checkbox"/> Mathematics below grade level
<input type="checkbox"/> Provide additional examples	<input type="checkbox"/> Calculator	<input type="checkbox"/> Special seating	<input type="checkbox"/> Visual learner
<input type="checkbox"/> Road test	<input type="checkbox"/> Scribe	<input type="checkbox"/> Behavior Intervention Plan (BIP)	<input type="checkbox"/> Auditory learner
<input type="checkbox"/> Location with minimal distractions	<input type="checkbox"/> Delete spelling requirements	<input type="checkbox"/> Extra time to complete assignment	<input type="checkbox"/> Kinesthetic hands on learner
<input type="checkbox"/> Small group in separate location	<input type="checkbox"/> Computer or word processor	<input type="checkbox"/> Reading below grade level	<input type="checkbox"/> Other

**TEACHER NOTES**