



ELEMENTARY OCCASIONAL TEACHER PACKAGE for

School: _____

(Balanced Day Schedule)

Classroom Teacher(s): _____

Grade(s): _____

Room Number: _____

DAILY SCHEDULE (Balanced Day)

A.M Notes:

Monday	Tuesday	Wednesday	Thursday	Friday

First Nutrition Break

Mid-Day Notes:

Monday	Tuesday	Wednesday	Thursday	Friday

Second Nutrition Break

P.M. Notes:

**Food Allergies/Students
with Special Needs**

**SUPERVISION
DUTIES**

