

# OUR LEARNING PLAN

DATE / /

WHAT WILL YOU ACCOMPLISH IN THE MORNING?	WHAT WILL YOU ACCOMPLISH IN THE AFTERNOON?
TO DO	NOTES
<ul style="list-style-type: none"><li><input type="radio"/></li><li><input type="radio"/></li><li><input type="radio"/></li><li><input type="radio"/></li><li><input type="radio"/></li><li><input type="radio"/></li><li><input type="radio"/></li><li><input type="radio"/></li><li><input type="radio"/></li><li><input type="radio"/></li></ul>	