

CEDARVILLE UNIVERSITY
Department of Exercise and Sport Science
Lesson Plan Format

Teacher _____ **Date of Lesson** _____

Unit/Theme _____ **Day of Unit** _____

Lesson Focus _____ **Grade Level/gender** _____

Skills already developed by students: _____

What happened previous lesson?

Lesson Objectives:

Primary Psychomotor (behavior, criterion, condition,): _____

Secondary Psychomotor (behavior, criterion, condition): _____

Primary Cognitive (behavior, criterion, condition): _____

Primary Affective (behavior, criterion, condition): _____

Primary Fitness: _____

Ohio state standards targeted: _____

Assessment(s) used for measuring performance criteria: _____

Teacher objective for improving teaching: _____

Equipment and Supplies: _____

Modifications (if needed): _____

“Special needs” students adapted activities: _____

Reflection (after lesson is taught):

Time	Activity/Task Development	Organizational Management	Teaching Cues	What happened

Time	Activity/Task Development	Organizational Management	Teaching Cues	What happened

