

**TEACHER:** \_\_\_\_\_ **MONTH:** \_\_\_\_\_ **DATE:** \_\_\_\_\_ **CLASS:** \_\_\_\_\_**Contact number:** \_\_\_\_\_

<b>Scripture:</b>		<b>Monthly Special Days:</b>	
<b>Color:</b>			
<b>Shape:</b>			
<b>Art:</b>		<b>Blocks:</b>	
<b>Books:</b>		<b>Home living:</b>	
<b>Music:</b>		<b>Puzzles/Manipulatives:</b>	
<b>Science Project:</b>		<b>Special Curriculum Snack:</b>	
<b>Parent Note Overview:</b>		<b>Classroom Setup Needs:</b>	