**Sensory Lesson Plan**

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| **Your Name:** |  |
| **Lesson Name:** |  |
| **Age Group:** |  |
| **Objectives:**  *(What do you want the children to learn.)* |  |
| **CDA Competency Standard:** |  |
| **Materials Needed:** |  |
| **Procedure:** |  |
| **Assessment:**  ***(How do you know the children learned what you wanted them to learn?)*** |  |