| Complete the Home | learning Checklist | by filling in the 2 | activities you did for each | subject in that section. |
|-------------------|--------------------|---------------------|-----------------------------|--------------------------|
| | 5 | | | v |

| | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 |
|----------|-------|-------|-------|-------|-------|
| Language | | | | | |
| Arts | | | | | |
| | | | | | |
| Math | | | | | |
| | | | | | |
| | | | | | |
| Gym | | | | | |
| | | | | | |
| 1 Extra | | | | | |
| Activity | | | | | |