

S.D.F. Activity Plan

Domain: Student Life Educator(s):	COTTAGE: <input type="checkbox"/> Pinon <input type="checkbox"/> Chamisa <input type="checkbox"/> Aspen <input type="checkbox"/> Juniper <input type="checkbox"/> Yucca <input type="checkbox"/> Sage <input type="checkbox"/> Ponderosa <input type="checkbox"/> Sunflower
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Date of Activity:	Place of Activity:	Time of Activity:
Goal of Activity:	Materials Needed:	
Leaders:	Students:	

Title of Activity:
Description:

Student Life Supervisor: _____ **Student Life Educator:** _____

COMPLETE AFTER ACTIVITY	
Activity Held as Planned? <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Student Participants:
Was activity successful? <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of leaders present:
Comment: _____ _____ _____	

Student Life Supervisor: _____ **Student Life Educator:** _____