

**NSWIHCS WEEKLY PROGRAM TEMPLATE**



**Week Ending:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ .

**Educator:** \_\_\_\_\_

**Family name:** \_\_\_\_\_

**National Quality Framework:** Early Years Learning Framework: “Belonging, Being & Becoming”  
**and/or Framework for School Age Care: “My Time, Our Place”** *(circle/highlight sub-outcomes)*

- |  |     |     |     |     |     |  |  |
|--|-----|-----|-----|-----|-----|--|--|
| Outcome 1 - Children have a strong sense of identity:                  | 1.1 | 1.2 | 1.3 | 1.4 |     |  |  |
| Outcome 2 - Children are connected with and contribute to their world: | 2.1 | 2.2 | 2.3 | 2.4 |     |  |  |
| Outcome 3 - Children have a strong sense of well-being:                | 3.1 | 3.2 |     |     |     |  |  |
| Outcome 4 - Children are confident and involved learners:              | 4.1 | 4.2 | 4.3 | 4.4 |     |  |  |
| Outcome 5 - Children are effective communicators:                      | 5.1 | 5.2 | 5.3 | 5.4 | 5.5 |  |  |

WEEKLY JOT DOWN	Day/s observed						
	M	T	W	T H	F	S	S U
<b>Music/Rhythm &amp; Movement</b>							
•							
•							
•							
<b>Math or Science &amp; Nature</b>							
•							
•							
•							
<b>Art or Skill Based Activities</b>							
•							
•							
•							
<b>Communication &amp; Language</b>							
•							
•							
•							
<b>Personal, Emotional or Social</b>							
•							
•							
•							
<b>Special or Spontaneous Activities</b>							
•							
•							
•							

**HIGHLIGHT/S OF THE WEEK:** *(children comments, photos or work samples)*

**WEEKLY EVALUATION/REFLECTION:**

**FUTURE PLANNING/EXTENSION OF  
INTEREST:**

**CHILD/PARENT/NSWIHCS STAFF  
COMMENT:**