

# Aide/Volunteer To-Do List

Date \_\_\_\_\_

\_\_\_\_\_ minutes per student

Please assist with the following activities for the allotted time.

- 1.
- 2.
- 3.
- 4.

Extra options (activities that can be performed if time remains)

- 1.
- 2.



## Students

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_

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1. \_\_\_\_\_
2. \_\_\_\_\_
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6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_