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| Group Name: Curriculum Area: Term / Week:  Learning Intention:  Success Criteria: | | | | | | |
| **Name** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Notes** |
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| Next steps for planning and teaching… |  | | | | | |

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| Group Name: Curriculum Area: Term / Week:  Learning Intention:  Success Criteria: | | | | | | |
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| Next steps for planning and teaching… |  | | | | | |