

SESSION PLAN

SESSION TITLE: _____

SESSION NUMBER: _____ **DATE:** _____

TOTAL HOURS FOR THIS SESSION : _____ **VENUE:** _____

TUTOR NAME: _____

Target Group *(in detail describe participants eg: gender / age range / literacy&numeracy level / education level / work experience / employment level and pre-requisites they must poses to start this training)*

Learning Outcome *(in detail describe the final outcome for this session - what you wish to achieve)*

TIME	LEARNING ACTIVITIES	RESOURCES	ASSESSMENTS and other COMMENTS
	Prior to session <i>(list the type of set up that needs to be prepared by the trainer prior to session)</i>		
	OH&S and Attendance Information <i>(list OHS steps and Attendance sheet and explanations)</i>		

TIME	LEARNING ACTIVITIES	RESOURCES	ASSESSMENTS and other COMMENTS
	Lesson Start <i>(section heading)</i>		

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