

1

week

Piano

Practice

PLANNER

MODULE GOAL SETTING

INSTRUCTIONS: In this section only write down **NEW** material you are learning for the week. If you do not have anything new for the week, leave that specific category blank.

WHAT SCALES ARE YOU ADDING TO YOUR CHART THIS WEEK?

WRITE NEW SCALES HERE:

1:

2:

3:

WHAT NEW CONCEPTS ARE YOU LEARNING THIS WEEK?

WRITE NEW CONCEPTS HERE:

1:

2:

3:

WHAT NEW SONGS/PASSAGES ARE YOU MEMORIZING THIS WEEK?

WRITE NEW SONGS HERE:

1:

2:

3:

1

FINGER DEVELOPMENT

INSTRUCTIONS: In this section only write down **NEW** material you are learning for the week. If you do not have anything new for the week, leave that specific category blank.

NAME OF SCALE (OR WRITE NOTES)	KEYS	SUN	MON	TUE	WED	THU	FRI	SAT	TEMPO
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

ANY FAVORITES???	KEYS	SUN	MON	TUE	WED	THU	FRI	SAT	TEMPO
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

VOCABULARY DEVELOPMENT

INSTRUCTIONS: Write down the chord or movement you are studying.
Be specific with your examples when filling out the chart

2

WHAT IS THE CHORD OR MOVEMENT? DESCRIBE IN YOUR OWN WORDS.

GIVE AN EXAMPLE WHERE YOU CAN USE THIS.

WHAT IS YOUR LEVEL OF MASTERY?

WHAT KEYS CAN YOU PLAY THIS IN?

LOW

I'M OK

I'M AMAZING

C

Db

D

Eb

E

F

F#

G

Ab

A

Bb

B

3

WHAT IS THE CHORD OR MOVEMENT? DESCRIBE IN YOUR OWN WORDS.

GIVE AN EXAMPLE WHERE YOU CAN USE THIS.

WHAT IS YOUR LEVEL OF MASTERY?

WHAT KEYS CAN YOU PLAY THIS IN?

LOW

I'M OK

I'M AMAZING

C

Db

D

Eb

E

F

F#

G

Ab

A

Bb

B

TECHNIQUE DEVELOPMENT

INSTRUCTIONS: Write down the chord or movement you are studying.
Be specific with your examples when filling out the chart

4

NAME THE MUSICIAN:

NAME THE SONG:

PASTE URL HERE:

WHAT MINUTE::SECOND DO YOU WANT TO LEARN?

HAVE YOU FIGURED OUT THE NOTES?

WRITE OUT THE NOTES/CHORDS:

CHECK WHEN THE SONG IS MEMORIZED

CHECK WHEN YOU HAVE THE FEEL

CHECK WHEN YOU CAN PLAY IN MULTIPLE KEYS

LEARNING SUMMARY

START DATE

____/____

END DATE

____/____

NOTES

FINGER

VOCAB

TECHNIQUE

MISC