My Infinity Learning Map _____ Date _____

Draw:

- **The people that help me learn**
- **The tools that help me learn**
- **The places where I learn**
- **The interactions between me and the people and tools**

What could you change, grow or develop to improve your learning?

_____
_____
_____
_____

What YOU will do differently to make the improvement?

_____
_____
_____
_____

Support from my teacher

_____
_____
_____
_____
_____

Support from my family or others

_____
_____
_____
_____
_____

www.infinitylearn.org/
info@infinitylearn.org
Twitter @infinitylearner
Infinity Learn Limited
© Copyright 2016