

Student's Name: \_\_\_\_\_

Grade Level : \_\_\_\_\_

Name of your Education Guide: \_\_\_\_\_

Activity for the month of: \_\_\_\_\_

(For example: September 2015)

Type of Activity: Check each activity you did this month. Or add under "other" the activities you participated in for the month.

- |   |   |
|---|---|
| <input type="checkbox"/> Aerobic Workout              | <input type="checkbox"/> Horseback Riding               |
| <input type="checkbox"/> Bike Riding                  | <input type="checkbox"/> Jogging                        |
| <input type="checkbox"/> Basketball                   | <input type="checkbox"/> Martial Arts                   |
| <input type="checkbox"/> Bowling                      | <input type="checkbox"/> Playground/Movement Activities |
| <input type="checkbox"/> Dancing                      | <input type="checkbox"/> Soccer                         |
| <input type="checkbox"/> Football                     | <input type="checkbox"/> Skateboarding                  |
| <input type="checkbox"/> Exercise using gym equipment | <input type="checkbox"/> Swimming                       |
| <input type="checkbox"/> Hiking                       | <input type="checkbox"/> Trampoline Workout             |
| <input type="checkbox"/> Volleyball                   |   |
| <input type="checkbox"/> Other:                       |   |

Skill(s) practiced this month:

\_\_\_\_\_

\_\_\_\_\_

*For example. For swimming the skill practiced could be the "Butterfly Stroke"*

Total activity minutes this month (For example: 600): Required time = 150 minutes per week for K-5 students and 225 minutes for students in grades 6-8.

\_\_\_\_\_

What was your favorite activity this month and why?

\_\_\_\_\_

\_\_\_\_\_

How have your skills and/or physical endurance improved this month?

\_\_\_\_\_

\_\_\_\_\_

List your PE goals for next month: