School District #47 Powell River

Physical Education Activity Logs

Student Name: _____ **Submission Date**: _____

Activity Log Page (eg.1 for first) #_____ (*to help you keep these in order*)

Category:
Check those that apply and be sure to log activities in each category unless otherwise indicated on your student learning plan.

□ **Alternative Environment Activities**
□ **Dance**
□ **Games**
□ **Individual and Dual Activities**
□ **Course (eg. First Aid)**

Date	Description (details)	Location	Coach/Inst. (Y/N)	Time Spent (hrs)
			Total Hours	

Can be verified by:
Full Name: _____ Phone Number _____

Relation to Student (eg. Coach, Parent,...) _____