Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  | **SWEAT****moderate to vigorous physical activity** | **STEP****light walking/activity** | **SLEEP****hours per night** | **Sit/Screen Time****hours per day** |
| **EXAMPLE** | **Nike Training App** | **30 minutes** | **-Walked the dog for 30 minutes****-Yard work with family for 60 minutes****-Hike in the trails while practicing social distancing 2 hours** | **8.5 hours** | **2 hours of school work/screen time during the day to complete assignments and meet with teachers** |
| **Reflection on how the work-out went: how did you feel before, during after? Effects of exercise physically, mentally, emotionally.**  |
| Monday |  |  |  |  |
| Tuesday |  |  |  |  |
| Wednesday |  |  |  |  |
| Thursday |  |  |  |  |
| Friday |  |  |  |  |