



Action Schools! BC

DPA Log

GRADES 4 TO 7

Submit in excel format or fax 604.333.3579

School Name & SD#: _____

Teacher: _____

Grade: _____ Division: _____

Week of: _____

MONDAY	FREQ	DUR	TUESDAY	FREQ	DUR	WEDNESDAY	FREQ	DUR	THURSDAY	FREQ	DUR	FRIDAY	FREQ	DUR
Scheduled PE:			Scheduled PE:			Scheduled PE:			Scheduled PE:			Scheduled PE:		
Classroom Action:			Classroom Action:			Classroom Action:			Classroom Action:			Classroom Action:		
<input type="checkbox"/> Bounce-at-the-Bell			<input type="checkbox"/> Bounce-at-the-Bell			<input type="checkbox"/> Bounce-at-the-Bell			<input type="checkbox"/> Bounce-at-the-Bell			<input type="checkbox"/> Bounce-at-the-Bell		
<input type="checkbox"/> Skipping Rope			<input type="checkbox"/> Skipping Rope			<input type="checkbox"/> Skipping Rope			<input type="checkbox"/> Skipping Rope			<input type="checkbox"/> Skipping Rope		
<input type="checkbox"/> Classroom Workouts			<input type="checkbox"/> Classroom Workouts			<input type="checkbox"/> Classroom Workouts			<input type="checkbox"/> Classroom Workouts			<input type="checkbox"/> Classroom Workouts		
<input type="checkbox"/> Chair Aerobics			<input type="checkbox"/> Chair Aerobics			<input type="checkbox"/> Chair Aerobics			<input type="checkbox"/> Chair Aerobics			<input type="checkbox"/> Chair Aerobics		
<input type="checkbox"/> Walking/Running			<input type="checkbox"/> Walking/Running			<input type="checkbox"/> Walking/Running			<input type="checkbox"/> Walking/Running			<input type="checkbox"/> Walking/Running		
<input type="checkbox"/> Playground Games			<input type="checkbox"/> Playground Games			<input type="checkbox"/> Playground Games			<input type="checkbox"/> Playground Games			<input type="checkbox"/> Playground Games		
<input type="checkbox"/> Tag			<input type="checkbox"/> Tag			<input type="checkbox"/> Tag			<input type="checkbox"/> Tag			<input type="checkbox"/> Tag		
<input type="checkbox"/> Playground Circuit			<input type="checkbox"/> Playground Circuit			<input type="checkbox"/> Playground Circuit			<input type="checkbox"/> Playground Circuit			<input type="checkbox"/> Playground Circuit		
<input type="checkbox"/> Grippers			<input type="checkbox"/> Grippers			<input type="checkbox"/> Grippers			<input type="checkbox"/> Grippers			<input type="checkbox"/> Grippers		
<input type="checkbox"/> Exercise Bands			<input type="checkbox"/> Exercise Bands			<input type="checkbox"/> Exercise Bands			<input type="checkbox"/> Exercise Bands			<input type="checkbox"/> Exercise Bands		
<input type="checkbox"/> Head-to-Toe Stretch			<input type="checkbox"/> Head-to-Toe Stretch			<input type="checkbox"/> Head-to-Toe Stretch			<input type="checkbox"/> Head-to-Toe Stretch			<input type="checkbox"/> Head-to-Toe Stretch		
<input type="checkbox"/> Action Breaks			<input type="checkbox"/> Action Breaks			<input type="checkbox"/> Action Breaks			<input type="checkbox"/> Action Breaks			<input type="checkbox"/> Action Breaks		
<input type="checkbox"/> Brain Energizers			<input type="checkbox"/> Brain Energizers			<input type="checkbox"/> Brain Energizers			<input type="checkbox"/> Brain Energizers			<input type="checkbox"/> Brain Energizers		
<input type="checkbox"/> Nutrition			<input type="checkbox"/> Nutrition			<input type="checkbox"/> Nutrition			<input type="checkbox"/> Nutrition			<input type="checkbox"/> Nutrition		
<input type="checkbox"/> Health			<input type="checkbox"/> Health			<input type="checkbox"/> Health			<input type="checkbox"/> Health			<input type="checkbox"/> Health		
Other Action Zones:														