

# 2018 – 2019 CONFIRMATION OF DAILY PHYSICAL ACTIVITY FOR **GRADE 11's**

Student Last Name:	Called Name:	Student#
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**This Form Must Be Returned To The Office By The End Of The Dates WITH PARENT/GUARDIAN SIGNATURE**  
**This form is due to the office on the following dates:   ▪  Thurs, Nov. 22 (T1)   ▪  Thurs, Feb 14 (T2)   ▪  Thurs, June 06 (T3)**

List the Activities You Participated in That Meet DPA Requirements for Each Category Below:

	Are you currently taking a PE class in school?	School Sports Programs & Extracurricular Activities  (School Teams, Intramurals, School Outings, Terry Fox Run, etc.)	Community Organized Programs  (Community Sports Teams, Bike Clubs, etc)	Personal Interest Activities  (At home or in the community including Swimming lessons, Gym Memberships, Fitness Groups, etc)	I acknowledge my responsibility to record my daily physical activities and my family supports me in the completion of this Ministry / Graduation requirement. I have met the 150 minutes / week of moderate to vigorous exercise.
<b>TERM 1</b>	<input type="checkbox"/> Yes Course Name: _____  <input type="checkbox"/> No				Student Signature: _____  Parent/Guardian Signature: _____
<b>TERM 2</b>	<input type="checkbox"/> Yes Course Name: _____  <input type="checkbox"/> No				Student Signature: _____  Parent/Guardian Signature: _____
<b>TERM 3</b>	<input type="checkbox"/> Yes Course Name: _____  <input type="checkbox"/> No				Student Signature: _____  Parent/Guardian Signature: _____