

## 150 minutes per week of Daily Physical Activity / Student Log

Seycove Secondary School  
 1204 Caledonia Avenue  
 North Vancouver, BC, V7G 2A6  
 Phone: 604-903-3666 Fax: 604-903-3667



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

Grade: \_\_\_\_\_ Month: \_\_\_\_\_

DPA Requirements:  Met  Not Met

Teacher Signature \_\_\_\_\_

		Endurance Activities (min.)	Strength Activities (min.)	Flexibility Activities (min.)	Total Minutes
Wk #	M				
	T				
	W				
	Th				
	F				
Wk #	M				
	T				
	W				
	Th				
	F				
Wk #	M				
	T				
	W				
	Th				
	F				
Wk #	M				
	T				
	W				
	Th				
	F				
Wk #	M				
	T				
	W				
	Th				
	F				

*We acknowledge that the DPA log for this month is accurate*

\_\_\_\_\_  
 (Student Signature)

\_\_\_\_\_  
 (Parent Signature)