

Wall Township High School Option II Alternative PE Weekly Log

Student Name _____

Marking Period _____

H & PE Teacher _____

Week Beginning _____

Day	Date	Hours	Activity
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Total minutes for week			

Coach/Instructor's original signature

Date

School Counselor's original signature

Date

Verifies completion of hours

Verifies log meets required minutes

- The student is required to maintain a record of completion with this form and all related documentation for class credit.
- Failure may result if journals are incomplete or have not demonstrated that you have reached the requirements.
- Two late journals and/or logs in a marking period may result in failure.
- Minutes do not carry over from week to week.