



Thurston Middle School
 Physical Education
 Make-Up Form

STUDENT NAME:	
TEACHER NAME:	
CLASS PERIOD:	
DATE ABSENT:	
DATE of MAKE-UP:	

In order to receive full credit (2pts) for one day absent you must participate in an activity for a minimum of 30 minutes. You must also complete ALL of the information on this form. *Describe the activity in detail using complete sentences:*

Warm-up/Cool Down: _____
Duration of Activity: _____

Intensity: (Circle One) LOW MODERATE HIGH

Parent Signature _____



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