Independent Study - Physical Education

MONTHLY ACTIVITY LOG

LAGUNA BEACH
UNIFIED SCHOOL DISTRICT

Student Information	
Student's Name:	School & Grade:
Semester:	Year:
ISPE Approved Sport/Activity:	
Reporting Period from:	To:

Date	Location	Specific Activity*	Total Hours

Coach/Instructor Signature: _____ Date: _____

Certificated Teacher Verification of Guidelines Met: _____ Date: _____

Must be submitted the first week of every month to the Counseling Office. Be specific as to the drill or skill that was involved. For example, "swim practice" is insufficiently detailed; however, "swam 50 laps of butterfly stroke" is sufficient. Failure to submit monthly Independent Study Activity Logs may result in removal from the program without credit. LATE REPORTS WILL NOT BE ACCEPTED.

Please Retain a Copy for Your Records