

School: County:

Steps to Health Educator:

Teacher: _

When each lesson is taught:

1. write the date of the lesson; 2. write the length of the lesson in minutes; 3. check off which students were in attendance on that date and for that lesson.

| Student's First Name | Student's Last Name | Ethnic Group | A. Hispanic/ Latino OR (If "mixed" or "other," write all numbers that apply) 1. American Indian or Alaska Native | Gender Male OR Female | Date: # Min.: Version 1 | Date: # Min.: Version S | Date: # Min.: uoissas | Date: # Min.: | Date: # Min.: | Date: # Min.: 9 uoissa 5 | Date: # Min.: Vuoisses | Date: # Min.: | Date: # Min.: 6 0 0 0 0 0 0 0 0 0 0 0 0 0 |
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| | | B. Non-Hispanic/ | | | | | | | | | | | |
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