

Year: \_\_\_\_\_

School: \_\_\_\_\_  
County: \_\_\_\_\_

Nutrition 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 B. Non-Hispanic/Non-Latino	Race (If "mixed" or "other," write all numbers that apply) 1. American Indian or Alaska Native 2. Asian 3. Black/African American 4. Native Hawaiian/Pacific Islander 5. White	Gender Male OR Female	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:
					# Min.:	# Min.:	# Min.:	# Min.:	# Min.:	# Min.:	# Min.:	# Min.:	# Min.:
					Session 1	Session 2	Session 3	Session 4	Session 5	Session 6	Session 7	Session 8	Session 9

