Place a check mark or date in a box to indicate progress.

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| --- | --- | --- | --- | --- | --- |
|  | Over box, bench, or beam | | Over rope | | |
| Name | Hips high, knees bent | Legs higher than hips | Hips high, knees bent | Legs higher than hips | Legs higher than hips; one hand, then other |
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## Figure 16.14 Observation checklist skill cues for wheeling.