

# Contest Participant Checklist

Teacher \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Contest start date \_\_\_\_\_ Contest end date \_\_\_\_\_

| Student name | Screen Time Chart                  | Graph-It Worksheets 1 and 2        | Freeze My TV Journal               |
|--------------|------------------------------------|------------------------------------|------------------------------------|
| 1.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 2.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 3.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 4.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 5.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 6.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 7.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 8.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 9.           | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 10.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 11.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 12.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 13.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 14.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 15.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 16.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 17.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 18.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 19.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 20.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 21.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 22.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |

(continued)

From L.W.Y. Cheung, H. Dart, S. Kalin, B. Otis, and S.L. Gortmaker, 2016, *Eat Well & Keep Moving*, 3rd ed. (Champaign, IL: Human Kinetics).

(continued)

| Student name | Screen Time Chart                  | Graph-It Worksheets 1 and 2        | Freeze My TV Journal               |
|--------------|------------------------------------|------------------------------------|------------------------------------|
| 23.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 24.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 25.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 26.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 27.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 28.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 29.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 30.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 31.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 32.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 33.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 34.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 35.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 36.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 37.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |
| 38.          | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> | Completed <input type="checkbox"/> |

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