

TRACKING LEVELS  
OF DAILY PHYSICAL  
ACTIVITY.



# MY GO! BOOK



**MY NAME:**



**PHE Canada**  
Physical & Health Education Canada

1

# MY DAILY PHYSICAL ACTIVITY WORKBOOK

**A.**

**MY NAME:**

**B.**

**WHAT GRADE AM I IN:**

**C.**

**NAME OF MY SCHOOL:**

THE PURPOSE OF THIS WORKBOOK IS TO HELP YOU UNDERSTAND THE AMOUNT OF PHYSICAL ACTIVITY YOU PARTICIPATE IN DURING THE WEEK. THIS WORKBOOK INCLUDES THE FOLLOWING:

MY WORKBOOK HAS:

1. My Physical Activities
2. What is Physical Activity Intensity?
3. Daily Physical Activity Intensity Tracker
4. How Active was I?: Activity Calculators
5. Activity Tracker Reflection
6. Goal Setting and Planning
7. Goal Setting Check-In

# MY PHYSICAL ACTIVITIES



In the space below draw/list the physical activities you like to do:

**A. Before school**

**B. During school**

**C. After school**

**D. Evenings**

# WHAT IS PHYSICAL ACTIVITY INTENSITY?

**Intensity** is how much energy and effort it takes to do a certain body movement. You notice the difference in intensity through how fast you breathe, how much you sweat, or how fast your heart beats. For example, sprinting is more intense than jogging, jogging is more intense than speed walking, and speed walking is more intense than walking. You can feel the difference in intensity in these movements by how much effort it takes and how quickly you get tired and “out of breath”.

## ACTIVITY 1: HOW INTENSE AM I?

Below is a list of different activity intensities.

1. Read each of the “Physical Activity Intensity” descriptions.
2. Next, using your “My Physical Activities” worksheet, write the correct intensity level beside each activity you drew/listed.

**inactive**  
(sedentary)



**light**  
(low)



**moderate**  
(quite a bit)



**intense**  
(vigorous, hard)



- Requires little or no movement with slow breathing.
- This is often in the form of sleeping, lying down, sitting, or standing still.

- Requires some movement with normal breathing.
- Such activities can be done for a long time without feeling tired or running out of breath or sweating.

- Requires quite a bit of movement with a noticeable increase in breathing and may cause you to sweat a little.
- Can usually be performed for quite a long time.
- You tend to be able to maintain a conversation (talk) during such activity.

- Requires lots of movement and effort so it is much more demanding than quick walking.
- It makes your heart beat and sweat and breathing rate go much faster.
- You tend to be too tired to maintain a conversation except for speaking in short sentences.
- You normally cannot keep this activity going for a long time without slowing down to moderate intensity.





# DAILY PHYSICAL ACTIVITY LEVEL TRACKER



## ACTIVITY 2: WEEKDAY PHYSICAL ACTIVITY TRACKING SHEET

The purpose of this activity is to help you understand the amount of physical activity you participate in for an entire week.

Below is an example of how you will track your physical activity intensities throughout the day.

1. In the “**What Was I Doing?**” block write all of the activities you did during each time period.
2. In the “**How Active Was I?**” block write the number of minutes it took you to complete each activity in the correct activity intensity square. The total number of minutes for each time period must equal 30 (Row Sum).
3. To calculate the “**Total Before School Activity Minutes**” add together the numbers in each activity intensity column.
4. To calculate the “**Row Sum**” add together the activity intensity numbers from each time period. Each “**Row Sum**” must equal 30.

### EXAMPLE

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <i>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOMEWORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</i>	HOW ACTIVE WAS I?				Row Sum (must = 30)
			Inactive 	Light 	Moderate 	Vigorous 	
Before School	6:30-7:00	Sleeping; Seated for Breakfast	30	0	0	0	⊖
	7:00-7:30	Washed up; Brushed teeth; Got ready for school	0	30	0	0	⊖
	7:30-8:00	Walked fast to the bus stop; Sat on bus, Walked to school	15	10	5	0	⊖
	Total Before School Minutes		45	40	5	0	90





# MY WEEKDAY PHYSICAL ACTIVITY TRACKER



## MONDAY

DATE:

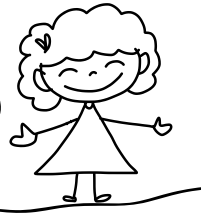
PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <small>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</small>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
Before School	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	Total Before School Minutes					
During School	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	10:00-10:30					
	10:30-11:00					
	11:00-11:30					
	11:30-12:00					
	12:00-12:30					
	12:30-1:00					

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <i>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</i>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
During School	1:00-1:30					
	1:30-2:00					
	2:00-2:30					
	2:30-3:00					
	Total During School Minutes					
After School	3:00-3:30					
	3:30-4:00					
	4:00-4:30					
	4:30-5:00					
	5:00-5:30					
	5:30-6:00					
	Total After School Minutes					
Evening	6:00-6:30					
	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	Total Evening Minutes					

HOW MUCH SLEEP DID I GET  
MONDAY NIGHT?

HOURS

# MY WEEKDAY PHYSICAL ACTIVITY TRACKER







## TUESDAY

DATE:

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <small>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME-WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</small>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
Before School	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	Total Before School Minutes					
During School	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	10:00-10:30					
	10:30-11:00					
	11:00-11:30					
	11:30-12:00					
	12:00-12:30					
	12:30-1:00					



PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <i>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</i>	HOW ACTIVE WAS I? Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
During School	1:00-1:30					
	1:30-2:00					
	2:00-2:30					
	2:30-3:00					
	Total During School Minutes					
After School	3:00-3:30					
	3:30-4:00					
	4:00-4:30					
	4:30-5:00					
	5:00-5:30					
	5:30-6:00					
	Total After School Minutes					
Evening	6:00-6:30					
	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	Total Evening Minutes					

HOW MUCH SLEEP DID I GET  
TUESDAY NIGHT?





HOURS





# MY WEEKDAY PHYSICAL ACTIVITY TRACKER



## WEDNESDAY

DATE: 

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <small>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME-WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</small>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
Before School	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	Total Before School Minutes					
During School	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	10:00-10:30					
	10:30-11:00					
	11:00-11:30					
	11:30-12:00					
	12:00-12:30					
	12:30-1:00					

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <i>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</i>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
During School	1:00-1:30					
	1:30-2:00					
	2:00-2:30					
	2:30-3:00					
	Total During School Minutes					
After School	3:00-3:30					
	3:30-4:00					
	4:00-4:30					
	4:30-5:00					
	5:00-5:30					
	5:30-6:00					
	Total After School Minutes					
Evening	6:00-6:30					
	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	Total Evening Minutes					

HOW MUCH SLEEP DID I GET  
WEDNESDAY NIGHT?

HOURS

# MY WEEKDAY PHYSICAL ACTIVITY TRACKER







## THURSDAY

DATE: 

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <small>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME-WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</small>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
Before School	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	Total Before School Minutes					
During School	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	10:00-10:30					
	10:30-11:00					
	11:00-11:30					
	11:30-12:00					
	12:00-12:30					
	12:30-1:00					

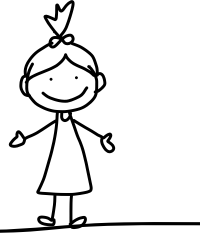


PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <i>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</i>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
During School	1:00-1:30					
	1:30-2:00					
	2:00-2:30					
	2:30-3:00					
	Total During School Minutes					
After School	3:00-3:30					
	3:30-4:00					
	4:00-4:30					
	4:30-5:00					
	5:00-5:30					
	5:30-6:00					
	Total After School Minutes					
Evening	6:00-6:30					
	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	Total Evening Minutes					

HOW MUCH SLEEP DID I GET  
THURSDAY NIGHT?

HOURS





# MY WEEKDAY PHYSICAL ACTIVITY TRACKER



## FRIDAY

DATE: 

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <small>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME-WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</small>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
Before School	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	Total Before School Minutes					
During School	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	10:00-10:30					
	10:30-11:00					
	11:00-11:30					
	11:30-12:00					
	12:00-12:30					
	12:30-1:00					

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <i>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</i>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
During School	1:00-1:30					
	1:30-2:00					
	2:00-2:30					
	2:30-3:00					
	Total During School Minutes					
After School	3:00-3:30					
	3:30-4:00					
	4:00-4:30					
	4:30-5:00					
	5:00-5:30					
	5:30-6:00					
	Total After School Minutes					
Evening	6:00-6:30					
	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	Total Evening Minutes					

HOW MUCH SLEEP DID I GET  
FRIDAY NIGHT?

HOURS





### ACTIVITY 3: WEEKEND PHYSICAL ACTIVITY TRACKING SHEET

The purpose of this activity is to help you understand the amount of physical activity you participate in on a weekend.

Below is an example of how you will track your physical activity intensities throughout the day.

1. In the “**What Was I Doing?**” block write down all the activities you did during each time period.
2. In the “**How Active Was I?**” block put the amount of time it took you to complete each activity in the correct activity intensity square. The total number of minutes for each time period must equal 30 (Row Sum).
3. To calculate the “**Total Morning Activity Minutes**” add together the numbers in each activity intensity column.
4. To calculate the “**Row Sum**” add together the activity intensity numbers from each time period. Each “**Row Sum**” must equal 30.

#### EXAMPLE

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING?  EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOMEWORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS	HOW ACTIVE WAS I?					Row Sum (must = 30) <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		
			Inactive 	Light 	Moderate 	Vigorous 				
Morning	6:30-7:00	Sleeping; Seated for Breakfast	30	+	0	+	0	+	0	30
	7:00-7:30	Washed up; Brushed teeth; Got ready for school	0	+	30	+	0	+	0	30
	7:30-8:00	Walked fast to the bus stop; Sat on bus, Walked to school	15	+	10	+	5	+	0	30
	Total Morning Activity Minutes		45	+	40	+	5	+	0	90













# MY WEEKEND PHYSICAL ACTIVITY TRACKER



## SATURDAY

DATE:

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <small>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</small>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
Morning	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	10:00-10:30					
	10:30-11:00					
	11:00-11:30					
	11:30-12:00					
	12:00-12:30					
	12:30-1:00					
	Total Morning Minutes					

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <i>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</i>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
After Noon	1:00-1:30					
	1:30-2:00					
	2:00-2:30					
	2:30-3:00					
	3:00-3:30					
	3:30-4:00					
	4:00-4:30					
	4:30-5:00					
	5:00-5:30					
	5:30-6:00					
	Total Afternoon Minutes					
Evening	6:00-6:30					
	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	Total Evening Minutes					

HOW MUCH SLEEP DID I GET  
SATURDAY NIGHT?

HOURS





# MY WEEKEND PHYSICAL ACTIVITY TRACKER



## SUNDAY

DATE: 

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <small>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME-WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</small>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
Morning	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	10:00-10:30					
	10:30-11:00					
	11:00-11:30					
	11:30-12:00					
	12:00-12:30					
	12:30-1:00					
	Total Morning Minutes					

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING? <i>EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOME- WORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS</i>	HOW ACTIVE WAS I?			
			Put a check mark under the activity level you did.			
			Inactive 	Light 	Moderate 	Vigorous 
After Noon	1:00-1:30					
	1:30-2:00					
	2:00-2:30					
	2:30-3:00					
	3:00-3:30					
	3:30-4:00					
	4:00-4:30					
	4:30-5:00					
	5:00-5:30					
	5:30-6:00					
	Total Afternoon Minutes					
Evening	6:00-6:30					
	6:30-7:00					
	7:00-7:30					
	7:30-8:00					
	8:00-8:30					
	8:30-9:00					
	9:00-9:30					
	9:30-10:00					
	Total Evening Minutes					

HOW MUCH SLEEP DID I GET  
SUNDAY NIGHT?

HOURS



# HOW ACTIVE WAS I?







## ACTIVITY 4A: WEEKDAY ACTIVITY TIME CALCULATOR

This calculator will help you know how active you were today.





This is an example of how to calculate your total number of minutes for each part of the day.

1. Using your “My Weekday Physical Activity Tracker” worksheet, copy the numbers from the “Total Before School Minutes” boxes into the “My Weekday Time Calculator”
2. Do the same thing for your Afternoon and Evening times.

### MY WEEKDAY PHYSICAL ACTIVITY TRACKER

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING?  EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOMEWORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS	HOW ACTIVE WAS I?					Row Sum (must = 30)		
			Inactive 	Light 	Moderate 	Vigorous 				
Before School	6:30-7:00	Sleeping; Seated for Breakfast	30	+	0	+	0	+	0	30
	7:00-7:30	Washed up; Brushed teeth; Got ready for school	0	+	30	+	0	+	0	30
	7:30-8:00	Walked fast to the bus stop; Sat on bus, Walked to school	15	+	10	+	5	+	0	30
	●●●●●●●●●● ● Total Before School Activity Minutes		45	+	40	+	5	+	0	90





### EXAMPLE

PHASE OF DAY	ACTIVITY LEVELS			
	Inactive 	Light 	Moderate 	Vigorous 
Total Before School Activity Minutes	45	40	5	0





# MY WEEKDAY TIME CALCULATOR



## MONDAY

PHASE OF DAY	INTENSITY			
	Inactive 	Light 	Moderate 	Vigorous 
Total Before School Minutes	<div>.....</div>	<div>.....</div>	<div>.....</div>	<div>.....</div>
Total During School Minutes	<div>.....</div>	<div>.....</div>	<div>.....</div>	<div>.....</div>
Total Afterschool minutes	<div>.....</div>	<div>.....</div>	<div>.....</div>	<div>.....</div>
Total Evening Minutes	<div>.....</div>	<div>.....</div>	<div>.....</div>	<div>.....</div>





## TUESDAY

PHASE OF DAY	INTENSITY			
	Inactive 	Light 	Moderate 	Vigorous 
Total Before School Minutes	<div>.....</div>	<div>.....</div>	<div>.....</div>	<div>.....</div>
Total During School Minutes	<div>.....</div>	<div>.....</div>	<div>.....</div>	<div>.....</div>
Total Afterschool minutes	<div>.....</div>	<div>.....</div>	<div>.....</div>	<div>.....</div>
Total Evening Minutes	<div>.....</div>	<div>.....</div>	<div>.....</div>	<div>.....</div>





# MY WEEKDAY TIME CALCULATOR



## WEDNESDAY

PHASE OF DAY	INTENSITY			
	Inactive 	Light 	Moderate 	Vigorous 
Total Before School Minutes	<div></div>	<div></div>	<div></div>	<div></div>
Total During School Minutes	<div></div>	<div></div>	<div></div>	<div></div>
Total Afterschool minutes	<div></div>	<div></div>	<div></div>	<div></div>
Total Evening Minutes	<div></div>	<div></div>	<div></div>	<div></div>





## THURSDAY

PHASE OF DAY	INTENSITY			
	Inactive 	Light 	Moderate 	Vigorous 
Total Before School Minutes	<div></div>	<div></div>	<div></div>	<div></div>
Total During School Minutes	<div></div>	<div></div>	<div></div>	<div></div>
Total Afterschool minutes	<div></div>	<div></div>	<div></div>	<div></div>
Total Evening Minutes	<div></div>	<div></div>	<div></div>	<div></div>

# MY WEEKDAY TIME CALCULATOR



FRIDAY

PHASE OF DAY	INTENSITY			
	Inactive 	Light 	Moderate 	Vigorous 
Total Before School Minutes	.....	.....	.....	.....
Total During School Minutes	.....	.....	.....	.....
Total Afterschool minutes	.....	.....	.....	.....
Total Evening Minutes	.....	.....	.....	.....






### ACTIVITY 4B: ACTIVE AND INACTIVE

Calculate how much time you are spending being inactive and active the whole day.

How **active** was I?

1. Using the “**My Weekday Activity Level Calculator**” worksheet calculate your “**Total Light Active Minutes**” by adding together the Total Before School, Total During School, Total After School, and Total Evening Minutes in the light column.
2. Repeat the same step to calculate the Moderate and Vigorous Active Minutes.






















### ACTIVE CHART

TOTAL NUMBER ACTIVE MINUTES	LIGHT ACTIVE MINUTES	MODERATE ACTIVE MINUTES	VIGOROUS ACTIVE MINUTES
			
Total Monday Active Minutes	— + — + — + — = —	— + — + — + — = —	— + — + — + — = —
Total Tuesday Active Minutes	— + — + — + — = —	— + — + — + — = —	— + — + — + — = —
Total Wednesday Active Minutes	— + — + — + — = —	— + — + — + — = —	— + — + — + — = —
Total Thursday Active Minutes	— + — + — + — = —	— + — + — + — = —	— + — + — + — = —
Total Friday Active Minutes	— + — + — + — = —	— + — + — + — = —	— + — + — + — = —

How **inactive** was I?

1. Using the “**My Weekday Activity Level Calculator**” worksheet calculate your “**Total Inactive Minutes**” by adding together the Total Before School, Total During School, Total After School, and Total Evening Minutes in the Inactive column.

## INACTIVE CHART

TOTAL NUMBER INACTIVE MINUTES	INACTIVE MINUTES
	
Total Monday Inactive Minutes	—  —  —  —  —
Total Tuesday Inactive Minutes	—  —  —  —  —
Total Wednesday Inactive Minutes	—  —  —  —  —
Total Thursday Inactive Minutes	—  —  —  —  —
Total Friday Inactive Minutes	—  —  —  —  —





### ACTIVITY 5A: WEEKEND ACTIVITY TIME CALCULATOR

This calculator will help you know how active you were today.





This is an example of how to calculate your total number of minutes for each part of the day.

1. Using your “**My Weekend Physical Activity Tracker**” worksheet, copy the numbers from the “**Total Morning Minutes**” boxes into the “**My Weekend Time Calculator**”
2. Do the same thing for your **Afternoon and Evening** times.

#### MY WEEKEND PHYSICAL ACTIVITY TRACKER

PHASE OF DAY	TIME OF DAY	WHAT WAS I DOING?  EXAMPLES: SLEEPING; LYING DOWN WATCHING TV; SITTING AND EATING OR DOING HOMEWORK, STANDING WHILE USING MY PHONE; WALKING DANCING; PLAYING SPOTS	HOW ACTIVE WAS I?							
			Inactive 	Light 	Moderate 	Vigorous 	Row Sum (must = 30)			
Morning	6:30-7:00	Sleeping; Seated for Breakfast	30	+	0	+	0	+	0	30
	7:00-7:30	Washed up; Brushed teeth; Got ready for school	0	+	30	+	0	+	0	30
	7:30-8:00	Walked fast to the bus stop; Sat on bus, Walked to school	15	+	10	+	5	+	0	30
	Total Morning Activity Minutes		45	+	40	+	5	+	0	90

#### EXAMPLE





PHASE OF DAY	ACTIVITY LEVELS			
	Inactive 	Light 	Moderate 	Vigorous 
Total Morning Activity Minutes	45	40	5	0







# MY WEEKEND TIME CALCULATOR



## SATURDAY

PHASE OF DAY	INTENSITY			
	Inactive 	Light 	Moderate 	Vigorous 
Total Morning Activity Minutes	.....	.....	.....	.....
Total Afternoon Activity Minutes	.....	.....	.....	.....
Total Evening Activity Minutes	.....	.....	.....	.....

## SUNDAY

PHASE OF DAY	INTENSITY			
	Inactive 	Light 	Moderate 	Vigorous 
Total Morning Activity Minutes	.....	.....	.....	.....
Total Afternoon Activity Minutes	.....	.....	.....	.....
Total Evening Activity Minutes	.....	.....	.....	.....




### ACTIVITY 5B: ACTIVE AND INACTIVE

Calculate how much time you are spending being inactive and active the whole day.

How **active** was I?

1. Using the “**My Weekend Activity Level Calculator**” worksheet calculate your “**Total Light Active Minutes**” by adding together the Total Morning, Total Afternoon, and Total Evening Minutes in the light column.
2. Repeat the same step to calculate the Moderate and Vigorous Active Minutes.


#### ACTIVE CHART

TOTAL NUMBER ACTIVE MINUTES	LIGHT ACTIVE MINUTES	MODERATE ACTIVE MINUTES	VIGOROUS ACTIVE MINUTES
			
Total Saturday Active Minutes	— + — + — + — = —	— + — + — + — = —	— + — + — + — = —
Total Sunday Active Minutes	— + — + — + — = —	— + — + — + — = —	— + — + — + — = —

How **inactive** was I?

3. Using the “**My Weekend Activity Level Calculator**” worksheet calculate your “**Total Inactive Minutes**” by adding together the Total Morning, Total Afternoon, and Total Evening Minutes in the Inactive column.

#### INACTIVE CHART

TOTAL NUMBER INACTIVE MINUTES	LIGHT INACTIVE MINUTES
	
Total Saturday Inactive Minutes	— + — + — + — = —
Total Sunday Inactive Minutes	— + — + — + — = —

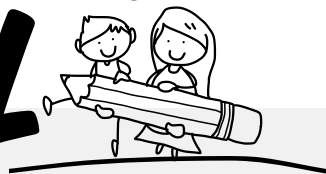
### ACTIVITY 5C: TOTAL WEEKLY ACTIVITY MINUTES

- Using the Total Number of Inactive and Active Minute charts write the corresponding numbers in the lines below. Write down all inactive minutes of each day in the “Inactive minutes block. Do the same for Light active minutes, moderate active minutes, and vigorous active minutes”.

### WEEKLY ACTIVE CALCULATOR

TOTAL NUMBER OF INACTIVE MINUTES	INACTIVE MINUTES	LIGHT ACTIVE MINUTES	MODERATE ACTIVE MINUTES	VIGOROUS ACTIVE MINUTES
<b>Total Weekly Inactive Minutes</b> (Monday+Tuesday+ Wednesday+Thursday+ Friday+Saturday+ Sunday = Total)	<hr/> +	<hr/> +	<hr/> +	<hr/> +
	<hr/> +	<hr/> +	<hr/> +	<hr/> +
	<hr/> +	<hr/> +	<hr/> +	<hr/> +
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# MY READY, CHECK, GO! JOURNAL



Fill in the questions below.

1. What part of the day were you the most active?

2. What activities did you do during this time?

3. What part of the day were you the least active?

4. What activities did you do during this time?

5. What are some new activities you would like to try?

6. How are you going to fit these new activities into your day?

# CANADIAN PHYSICAL ACTIVITY GUIDELINES



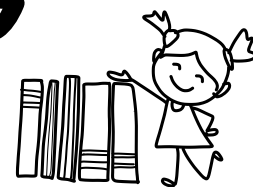
The Canadian Physical Activity Guidelines for Children Aged 12-14 recommend that you participate in at least 60 minutes of moderate- to- vigorous intensity physical activity every day. To help reach these guidelines use the following checklist:

- ▶ Vigorous-intensity activities at least 3 days per week.
- ▶ Activities that strengthen muscle and bone at least 3 days per week.
- ▶ Reducing the amount of daily inactive time. For example,
  - Spending no more than 2 hours each day in “screen time” (TV, computer...)
  - Spending less time in a motor vehicle (car, bus), sitting, and being indoors.

(Canadian Society of Exercise Physiology, 2011 at [csep.ca/guidelines](http://csep.ca/guidelines))

DAY OF THE WEEK	MODERATE ACTIVE MINUTES	VIGOROUS ACTIVE MINUTES	TOTAL ACTIVE MINUTES (MODERATE + VIGOROUS)	DID YOU MEET THE 60 MINUTES PER DAY GUIDELINE? (CIRCLE ONE)
MONDAY			___+___=___	YES OR NO
TUESDAY			___+___=___	YES OR NO
WEDNESDAY			___+___=___	YES OR NO
THURSDAY			___+___=___	YES OR NO
FRIDAY			___+___=___	YES OR NO
SATURDAY			___+___=___	YES OR NO
SUNDAY			___+___=___	YES OR NO

# GOAL SETTING AND PLANNING



The purpose of this activity is to help you understand how to set goals that can improve your physical activity levels and the different ways you can meet these goals.

## WHAT IS A GOAL?

A goal is a target that you can set for yourself to reach. For example, if you want to be less tired during the school day you can set a goal to get to bed earlier each night before school.

## HOW SHOULD I SET GOALS?

If you want to achieve your goal, it is best if you design **SMART** goals. The following table shows you how.

	STANDS FOR	MEANING
<b>S</b>	<b>SPECIFIC (CLEAR)</b>	A specific and clear example is: "I want to increase my moderate-intensity physical activity time by reducing by 2 minutes my walk to school." An example of a goal that is <b>not</b> specific is: "I want to walk faster."
<b>M</b>	<b>MEANINGFUL AND MEASUREABLE</b>	A goal is meaningful when striving for it is MODERATE enjoyable and of value to you. (e.g., playing hop scotch, tag, or swimming). A goal is measureable when you can actually tell (see or feel) if you are meeting it (doing what you are trying to do).
<b>A</b>	<b>ACTION-ORIENTED</b>	It needs to be something you actually do or perform not just write down.
<b>R</b>	<b>REALISTIC</b>	A goal is realistic if you can actually meet your goal with some challenge. It is unrealistic if the target you are trying to reach is too far from your current level that you won't be able to meet it.
<b>T</b>	<b>TIME-BOUND</b>	You should try to meet your goal within a certain time period like day(s), week(s), or month(s).

# MY GOAL PLANNER



## ACTIVITY 8: MY PHYSICAL ACTIVITY GOALS AND PLANS

Using your “**My Goal Planner**” come up with three **SMART** goals for the weekday and three **SMART** goals for the weekend, to help you improve your level of physical activity.

Once you have listed your goals come up with three activities that will help you meet them.

### “EXAMPLE”

MY GOALS FOR WEEKDAYS	WAYS TO HELP MEET THESE GOALS
<b>Before and During School:</b>  	
<b>After-School:</b>  Walk or bike home at a brisk pace at least three weekdays a week.	Ask a friend to walk or bike with me at least three times a week.
<b>Evening:</b>  	
MY GOALS FOR WEEKENDS	WAYS TO HELP MEET THESE GOALS
<b>Morning:</b>  Go for a brisk walk, jog, or bicycle ride with a friend(s) or family member.	Join my mom on her fitness walks on the weekends.
<b>Afternoon:</b>  	
<b>Evening:</b>  	



## MY GOAL PLANNER

## MY WEEKDAY AND WEEKEND GOALS

**MY GOALS FOR WEEKDAYS****WAYS TO HELP MEET THESE GOALS****Before and During School:****After-School:****Evening:****MY GOALS FOR WEEKENDS****WAYS TO HELP MEET THESE GOALS****Morning:****Afternoon:****Evening:**

# MY GOAL SETTING CHECK-IN



## Activity 9: My Goals Check-In

1. Which goals *did* I complete? How?

2. Which goals am I still working towards?

3. What made it *difficult* for me to reach my goals?

4. What *helped* me to reach my goals?

5. What are some *new goals* I want to set?

6. Do I need to change my goals?  
If yes, how?

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After School Partnership**