



Physical Activity Programs

H.E.A.L.T.H.Y.
Pledge Program

Time and Location Planning Tool

Name of School: _____

Student Feedback Collection Lead(s)¹ (School Staff Only): _____

	September	October	November	December	January	February	March	April	May	June
Before School										
Activity(ies)										
Location(s)										
PA Facilitator Name(s) ²										
PA Supervisor Name(s) ³ (School Staff Only)										
During School										
Activity(ies)										
Location(s)										
PA Facilitator Name(s) ²										
PA Supervisor Name(s) ³ (School Staff Only)										
After School										
Activity(ies)										
Location(s)										
PA Facilitator Name(s) ²										
PA Supervisor Name(s) ³ (School Staff Only)										

Roles and Responsibilities: ¹Gather student input and choices to select appropriate activities for school; ²Provide in-person support by leading and overseeing students as they participate in the activity(ies); ³Provide in-person supervisory support during activity.