Accelerometry Log

Meter Log

Wear the movement meter for seven (7) days in a row, including weekends. In the spaces below, write down the dates, days and times which you wear it. Please also write down the times school starts and ends each day. If you take the devices off for <u>more than 30 minutes</u>, such as for swimming, record when they were removed and for what reason. If you are unable to wear the meter for *at least* 12 hours one day, please wear it one extra day. Thank you!

Please start wearing your meter <u>on or before</u> _____.
The last full day that your meter will work is _____!

Day 1

(Circle Day)   **Mon   Tues   Wed   Thurs   Fri   Sat   Sun   Date_____**

Time Meter Put On:	**am / pm**	**Time school started:**	**am / pm**
Time Meter Taken Off: :	**am / pm**	**Time school ended:**	**am / pm**

Time removed during the day (e.g. 10:30-11am): _____   _____   _____
Why removed (e.g. swimming): _____   _____   _____

Day 2

(Circle Day)   **Mon   Tues   Wed   Thurs   Fri   Sat   Sun   Date_____**

Time Meter Put On:	**am / pm**	**Time school started:**	**am / pm**
Time Meter Taken Off: :	**am / pm**	**Time school ended:**	**am / pm**

Time removed during the day (e.g. 10:30-11am): _____   _____   _____
Why removed (e.g. swimming): _____   _____   _____

Day 3

(Circle Day)   **Mon   Tues   Wed   Thurs   Fri   Sat   Sun**   **Date**_____

Time Meter Put On:	**am / pm**	**Time school started:**	**am / pm**
Time Meter Taken Off: :	**am / pm**	**Time school ended:**	**am / pm**

Time removed during the day (e.g. 10:30-11am): _____   _____   _____
Why removed (e.g. swimming): _____   _____   _____

Day 4

(Circle Day)   **Mon   Tues   Wed   Thurs   Fri   Sat   Sun**   **Date**_____

Time Meter Put On:	**am / pm**	**Time school started:**	**am / pm**
Time Meter Taken Off: :	**am / pm**	**Time school ended:**	**am / pm**

Time removed during the day (e.g. 10:30-11am): _____   _____   _____
Why removed (e.g. swimming): _____   _____   _____

Day 5

(Circle Day)   **Mon   Tues   Wed   Thurs   Fri   Sat   Sun**   **Date**_____

Time Meter Put On:	**am / pm**	**Time school started:**	**am / pm**
Time Meter Taken Off: :	**am / pm**	**Time school ended:**	**am / pm**

Time removed during the day (e.g. 10:30-11am): _____   _____   _____
Why removed (e.g. swimming): _____   _____   _____

Day 6

(Circle Day)   **Mon   Tues   Wed   Thurs   Fri   Sat   Sun**   **Date**_____

Time Meter Put On:	**am / pm**	**Time school started:**	**am / pm**
Time Meter Taken Off: :	**am / pm**	**Time school started:**	**am / pm**

Time removed during the day (e.g. 10:30-11am): _____   _____   _____
Why removed (e.g. swimming): _____   _____   _____

Day 7

(Circle Day)   **Mon   Tues   Wed   Thurs   Fri   Sat   Sun**   **Date**_____

Time Meter Put On:	**am / pm**	**Time school started:**	**am / pm**
Time Meter Taken Off: :	**am / pm**	**Time school ended:**	**am / pm**

Time removed during the day (e.g. 10:30-11am): _____   _____   _____
Why removed (e.g. swimming): _____   _____   _____

Day 8 (if needed)

(Circle Day)   **Mon   Tues   Wed   Thurs   Fri   Sat   Sun**   **Date_____**

Time Meter Put On: **am / pm**   **Time school started:**   **am / pm**
Time Meter Taken Off: :   **am / pm**   **Time school started:**   **am / pm**

Time removed during the day (e.g. 10:30-11am): _____   _____   _____
Why removed (e.g. swimming): _____   _____   _____

FOR OFFICE USE ONLY

Participant ID _____   Date Initialized: _____

Recruiter   _____   Valid meter days: _____

Meter Number _____   First Mail Day: _____

You're done! Please include this log in your return envelope along with the meter and belt.