

## Schedule:

Please fill out what your typical week during the school year looks like, include all after school activities you participate in.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

List all seasonal and year-round activities that you participate in (sports, theater, clubs, etc.):

- 1.
- 2.
- 3.
- 4.

List all summer obligations that you have (vacations, summer school, etc.)

- 1.
- 2.
- 3.
- 4.