

NAME: _____

GRADE: _____

**ST. MICHAEL SCHOOL PRACTICE RECORD
QUARTER 2**

Week # and Date	Monday	Tuesday *DUE DATE	Wednesday	Thursday	Friday	Saturday	Sunday	TOTAL MINUTES	PARENT SIGNATURE	GRADE
<i>EXAMPLE</i>	<i>30 min.</i>		<i>0 min</i>	<i>30 min.</i>	<i>30 min.</i>	<i>0</i>	<i>30 min.</i>	<i>120 MIN.</i>	<i>MRS. SMITH</i>	<i>9.3/10</i>
1										
2										
3										
4										
5										
6										
7										
8										
9										

**PRACTICE RECORDS ARE DUE TUESDAYS WITH A PARENT
SIGNATURE!!!**

5TH GRADE

120 MINUTES= 10/10
110 MINUTES= 9.6/10
100 MINUTES= 9.3/10
90 MINUTES = 8.6/10
80 MINUTES= 8.3/10
70 MINUTES= 7.6/10
60 MINUTES= 7.3/10
50 MINUTES= 6.6/10
40 MINUTES= 6.3/10
30 MINUTES= 3/10
20 MINUTES = 2/10
10 MINUTES= 1/10

6TH, 7TH, 8TH GRADE

140 MINUTES = 10/10
130 MINUTES= 9.6/10
120 MINUTES= 9.3/10
110 MINUTES= 8.6/10
100 MINUTES=8.3/10
90 MINUTES=7.6/10
80 MINUTES= 7.3/10
70 MINUTES= 6.6/10
60 MINUTES=6.3/10
50 MINUTES= 5.6/10
40 MINUTES=5.3/10
30 MINUTES= 3/10
20 MINUTES=2/10
10 MINUTES=1/10