SSTRACKER
Scintillation Skills Tracker

MY TRAINING WEEK

FIRST NAME _____ SPORT _____ WEEK OF _____

DAY	WHAT I'LL PRACTICE	MINUTES	DONE	HOW IT FELT
MON			◯	☺ 😐 ☹
TUE			◯	☺ 😐 ☹
WED			◯	☺ 😐 ☹
THU			◯	☺ 😐 ☹
FRI			◯	☺ 😐 ☹
SAT			◯	☺ 😐 ☹
SUN			◯	☺ 😐 ☹

THIS WEEK'S FOCUS

MY BEST THIS WEEK

BEAT YOUR OWN NUMBER

LAST TIME _____ THIS WEEK _____

Only your own numbers go here.

PATCHES

DRAW ONE WHEN YOU FINISH

◯ ◯ ◯

GROWN-UP'S CORNER

"WHAT WAS THE BEST PART?"

Ask what was fun first.

Rest days are part of the plan. Stop if anything hurts.