

TEENS' DAILY REPORT

NAME: _____ TEAM: _____ DATE: _____

YES NO

- | | | | |
|-------|-------|---------------------|--|
| _____ | _____ | 1. BM? | WEIGHT?(last wk) _____ (this wk) _____ |
| _____ | _____ | 2. GET-OUT? | WHAT? _____ |
| _____ | _____ | 3. NAP? | HOW LONG? _____ |
| _____ | _____ | 4. GLASSES WATER? | HOW MANY? _____ |
| _____ | _____ | 5. HEALTH PROBLEMS? | WHAT? _____ |
| _____ | _____ | 6. REVIEWED? | WHAT? _____ |
| _____ | _____ | 7. EXTRA READING? | WHAT? _____ |

8. WHO DID YOU TALK TO TODAY? _____ SUMMARY OF DISCUSSION: _____

9. REACTION TO MORNING CLASS: _____

10. REACTION TO AFTERNOON CLASS: _____

11. DID YOU HAVE ANY BIG BATTLES OR TRIALS? _____ IF YES, EXPLAIN:

12. VICTORIES OR LESSONS? _____

13. ANYTHING SPECIAL FROM THE LORD TODAY? (verse, song, dream, vision, inspiration, etc.) PLEASE EXPLAIN: _____

14. NEEDS? _____

15. COMMENTS, IDEAS, REQUESTS, SUGGESTIONS? _____

This was the Daily Report used at the TTC's!