Food Bank U Activity Tracker

Student’s Information

Name: ____________________________________________

Phone Number: ___________________________ Email: ________________________________

Street Address: ________________________________________________________________

City: __________________ State: _______ Zip Code: _____________________________

School: ________________________________________________________________

Grade (check one): Pre-K □ K □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □

Today’s Activity

Activity Name: ________________________________________________________________

Category: ________________________________________________________________

Today’s Date: ________________________________________________________________

Student’s Response

After completing the activity, please answer the following prompts:

I enjoyed this project because…

Something new I learned from this project was…

Student’s initials: ________________________________________________________________

Parent/guardian/tutor’s initials: __________________________________________________

Please send a digital copy of this completed form to kmirando@okfoodbank.org