Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SCREEN TIME TRACKING RECORD**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Day of the week** | **TV SCREEN TIME** | **COMPUTER TIME**: Gaming, social media, WhatsApp, iPad, text messages etc. | **DAILY TOTAL SCREEN TIME** | **Parental Signature** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Comment:**

**Are you surprised by the results? Yes or no**

**Do you think the results are a concern? Why or why not?**

**What do you think you should do now?**