



Quality Education Fund 2010  
Application of New Project  
Part C: Project Details

Project Title:



Virtual Trainer: An Innovated Approach for Promoting Active Lifestyle, Health and Fitness of Secondary School Students



Proposed by:

Department of Sports Science and Physical Education,  
Faculty of Education,  
The Chinese University of Hong Kong



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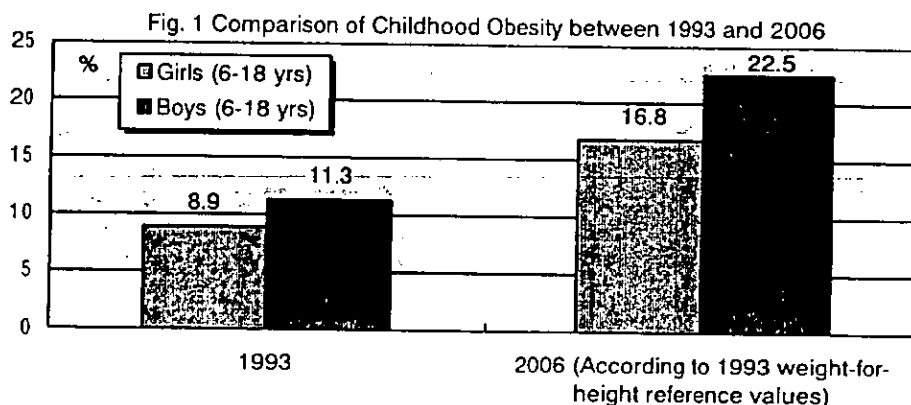
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## 1. Goals and Objectives

- i) To develop an interactive web-based computer program that includes components of an online exercise prescription and promotion program, termed the Virtual Trainer (VT) Program, for encouraging exercise participation and improvement of health and physical fitness of secondary school students. The developed program will be disseminated to all secondary school students in Hong Kong via the internet (e-mails / facebook) or telecommunication system (mobile phone / sms) as a supportive resource to the existing school curricula, particularly the PE curriculum.
- ii) To evaluate the extent of exercise compliance and maintenance of a sample of 500 secondary school students in Hong Kong who participated in an exercise intervention program prescribed by the VT program, as compared to the control.
- iii) To evaluate the improvement of the health-related physical fitness and blood profile of a sample of 100 secondary school students in Hong Kong who participated in an exercise intervention program prescribed by the VT program, as compared to the control (n=50).

## 2. Needs Assessment

Childhood obesity and physical inactivity are two important issues in children health nowadays. In May 2007, our research team released a research report on the body weight and height changes of 30,845 Hong Kong children aged 6-18 from 1993 to 2006 (Hui and Sum, 2007). It showed that obesity rate of boys raised from 11.3% in 1993 to 22.5% in 2006, and that for girls raised from 8.9% to 16.8%. The increment was doubled during this 14-year time (Fig. 1).



When we narrow down to analyze the obesity rate for secondary school students, we found that there has been a steady and progressive rise from 1993 to 2006, especially in girls. The percentage of obesity in secondary school girls raised from 12.1% in 1993 to 15.6% in 2006, whereas that for boys raised from 12.6% in 1993 to 17.6% in 2006.

There are a number of factors associated with the increase in childhood obesity. Among these factors, physical inactivity in children is considered the prominent one. In our community fitness survey for Hong Kong citizens 2005 funded by The Leisure and Cultural Services Department, it showed that TV/computer usage time is associated with increased BMI in both boys and girls aged 3-19 years (Hui, 2006) and decreased physical activity (PA) participation in girls aged 3-19 years (Hui, 2006).

In the 2004-05 academic year, we conducted a territory-wide survey about physical fitness, PA participation and attitudes towards physical education of secondary school students contracted by the Hong Kong Education Bureau (formerly known as the Education and Manpower Bureau). Among the

6,811 secondary school students sampled by a stratified random sampling strategy in 28 schools, we found that only about 35% of them reached the recommended level of physical activity (Hui, 2005). Consistently, in our community fitness survey for Hong Kong citizens 2005, only 33.8% of the 835 youths who aged 7-19 got enough PA (Hui, 2006).

In Hong Kong secondary schools, physical activity participation in PE classes is limited. In the usual class period of 35 mins in Hong Kong, 2 periods in a week, that is, about 70 mins of PE class per week. However, the students were "standing, sitting, or lying down" in about 64% of the class time (Johns & Ha, 1999). It is clear that students would not receive sufficient PA through the school PE curriculum. Therefore, an alternative approach is to encourage leisure time PA participation, and the development of VT would be one of the best and effective ways to motivate and encourage PA participation outside class time.

With the fact that extending PE class time seems impossible in the current PE curriculum, the key point is to encourage PA during leisure time to combat the problem of childhood obesity and physical inactivity. With the increasing popularity of information technology among secondary school students, we believe that the VT program would be an effective means to promote a more active lifestyle.

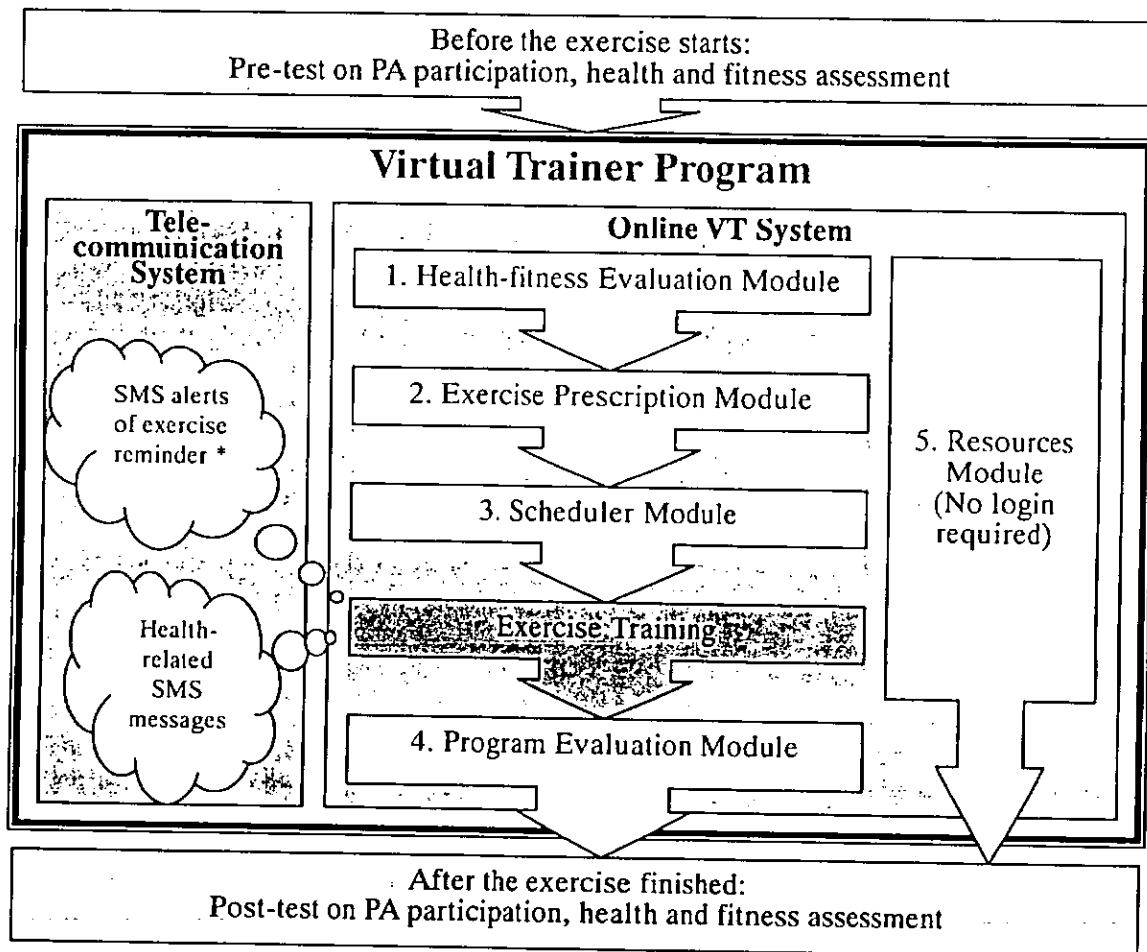
### 3. Applicant's Capability and Conceptual Framework

Virtual trainer (VT) is an interactive web-based computer program, with the integration of a telecommunication system (mobile phone messages), that can be disseminated through internet and mobile phone to encourage exercise participation and to improve the health and fitness status of users. In 2004-07, with the support of the Earmark Research Grant of the University Grant Council (UGC), we have successfully developed the VT program for general adults in Hong Kong (<http://www.vt.hk>). Through our experimental research, the VT program was found effective in health and fitness improvement, and good exercise compliance in Hong Kong sedentary adults. Desirable changes in body composition, abdominal endurance and blood total cholesterol in men was observed as compared to control. Also, 63.9% - 77% participants maintained regular exercise training for at least 6 months after intervention (Hui, 2007). In this proposal, we would like to modify our existing VT program and tailor-make a specialized VT program for secondary school students. In the case for students, we aim at facilitating exercise participation in addition to the formal PE curriculum class time.

In our community fitness survey for Hong Kong citizens 2005, youths aged 7-19 reported that one of the major reasons for inactivity was "lack of time" (Hui, 2006). Besides, lack of professional advice may also be a barrier for an active lifestyle. Nowadays, online communication by using personal computer (PC) is so popular among students, and it is likely that its usage displaced physical activity time and caused inactivity among teenagers. Thus, the VT program is aimed at tackling the above problems by utilizing the same IT channel (which is well-accepted by them) to help them mobilize, without limitation on time and place, offering professional advice designed and created by the professional research team behind. Moreover, personality of Chinese people maybe more conservative and an indirect way may help to reach them better. To our knowledge, a Chinese platform of similar online service is current not yet available in Hong Kong, and we are going to start this work.

Our current VT on-line computer program consists of two systems and five modules. The two systems are the *on-line VT system* and the *telecommunication system*. The five modules are the "Health-fitness Evaluation Module", "Exercise Prescription Module", "Scheduler", "Program Evaluation Module", and "Resources Module" (Fig. 2).

Fig. 2. Structural Components of the VT Program for Secondary School Students.



\* Remark: For the proposed "student version" of VT, we may consider replacing the SMS service by email due to inconvenience for students to receive SMS during school time.

### 2.1. Online VT System

In the online VT system we developed (<http://www.vt.hk>), users are provided with preliminary on-line health screening and health-related fitness assessments (Health-fitness Evaluation Module). Then, suggestions of exercise prescriptions are automatically generated by the VT program (Exercise Prescription Module) based on the preliminary health/fitness assessment and users' preferences. In our existing adult version of VT, three types of prescriptions are available: "Heart Health Prescription", "Weight Control Prescription" and "Personal Fitness Prescription". The program will automatically generate the most suitable type for the users. For the student version proposed in this project, the VT program will be modified to provide two types of prescriptions only, namely (1) general exercise prescription for fitness; and (2) weight control prescription for over-weight or obese users. To cater for individual preferences on exercise type, frequency and intensity within the context of personalize exercise prescriptions, the VT program adopts an interactive approach to retrieve preferences from the participants using a series of interactive questions (Scheduler Module). The program then automatically arranges the preferences of the users, such as date and time of exercise, type and intensity of exercise, etc., into a Scheduler program. The Scheduler program then keeps tracking the progress of the actual implementation of the user's exercise. In the Program Evaluation Module, users will be prompted to

report the progress of their exercise prescription, and recommendations for changes, reinforcements and other incentive messages are generated. Each recommended exercise program usually lasts for a minimum of 3 months. After that, users are asked to perform the on-line health-fitness evaluation again in order to assess the improvement on personal health and fitness. In the proposed student version of VT, we plan to design some online exercise or PA games so that students can be motivated to do more PA during leisure time.

One important feature of the VT program is that it will provide recommendations and suggestions on exercise prescription based on the responses retrieved from participants. To do this, exercise prescription needs to be programmed into the VT program, so that decision making can be automatically provided by the VT program. In this regards, a number of professional bodies have released these guidelines, such as the American Heart Association (AHA, 1999), American College of Sports Medicine (ACSM, 2000), and the World Health Organization (WHO, 2000), and they can be integrated into response-decision commands using advanced programming software. Please refer to Appendix A for a more detailed description of the VT program, and Appendix B for some illustrations showing the outlook of the existing VT program.

To make the VT more attractive and to simulate the real physical form of exercise trainers, we have designed 8 characters of VT (Please see the cover page). Users may select any one of the 8 designed VT as their personal trainer. Users will have their own personalized web page which simulates an exercise training room.

## 2.2. Telecommunication System

Nowadays, mobile phones and internet access are more and more common among teenagers. The VT program also utilizes these features and keeps communicating with the users in this way. It includes the frequent and daily dissemination of short messages to participants via e-mails / facebook, their mobile phones or personal palm / Pocket PC. This is how the telecommunication system comes into play. These messages include reminder messages for exercise, incentives messages, positive reinforcement messages, as well as helpful tips on exercise and diet. This function builds a close relationship between the users and the VT program, which has no limitation on time and place.

In our previous experience with our existing VT project, we successfully built this telecommunication system with the services supported by commercial company. Most of our clients enjoyed this service and they responded that, this kind of short message service via mobile phone strengthened their feelings of "personalized" and "virtual" trainer, which made the project more exciting. In the recent VT project conducted among Hong Kong middle-aged adults, there were also more than 70% of the subjects replied "Satisfied" or "Very satisfied" about our SMS service. The cost for the telecommunication is relatively low due to the advances in information technology, and is estimated at HK\$0.5 per message. In the proposed student version, communicating with the users via email is considered an option so as to save cost.

In the future student version of VT in this proposal, we plan to add some online fitness exercises as well. It is some interactive and funny animations to attract teenagers to do exercise at home. The idea is similar to the object searching game (<http://kidnetic.com/Kore/Hunt.aspx>) and home aerobics (<http://kidnetic.com/Kore/Move.aspx>) of the <http://kidnetic.com> website, and a "dancing chicken animation" (<http://www.chikinramen.com/exercise/exercise43.swf>) (For illustrations of these animations, please see Appendix C). The users are required to perform running and aerobics physically to complete the games at home.

#### 4. Targets and Expected Number of Beneficiaries

The project is targeted at ALL Hong Kong secondary school students as beneficiaries. As the VT website is accessible for all internet users, it will aim at providing exercise and health-related resources for all. Besides, a sample of 500 students from 5 local secondary schools (100 students each) will be recruited to track their exercise habits via participating in VT, of which 100 will be required to take the blood test for assessing changes in cardiovascular health. Another sample of 50 controls will also be recruited. The control subjects will only be assessed on their health-fitness evaluation and blood profile for 2 times, no intervention will be provided.

#### 5. Extent of Teachers', Principals' and Parents' Involvement in the Project

The teachers and principals may be involved to be engaged in the recruitment of students, collecting informed consent from parents, and evaluation of the program. Workshops for teachers and principles on how to use this program will be conducted.

The VT project will work closely with school P.E. Teachers / Health Education coordinators to integrate the VT project into their P.E. curriculum / health education curriculum. School-wide projects will be tailored-made.

Prior to recruiting students for participation, parent's seminars on students' health and physical activity will be organized. The purpose of the seminar is to give an overview to parents about the importance of physical activity participation and health, and to introduce the VT project for parents. To solicit support from parents, the VT project will inform the progress of their children via e-mail / sms. An evaluation questionnaire will also be sent to participated parents for their views and comments on the VT project.

#### 6. Implementation Plan with Time-line

Task #	Description	Progress
1	Preparation	1 <sup>st</sup> month
2	Program Development	
	• Design	2 <sup>nd</sup> – 4 <sup>th</sup> month
	• Embryo Program	5 <sup>th</sup> month
	• Pilot and Revision	5 <sup>th</sup> – 6 <sup>th</sup> month
3	Program Evaluation	
	• Pre-test	6 <sup>th</sup> – 7 <sup>th</sup> month
	• Exercise Intervention	6 <sup>th</sup> – 11 <sup>th</sup> month
	• Post-test	11 <sup>th</sup> – 13 <sup>th</sup> month
4	Maintenance Test	15 <sup>th</sup> – 16 <sup>th</sup> month
5	Data Analysis and Report Write Up	17 <sup>th</sup> – 18 <sup>th</sup> month
	Total:	18 months

## 7. Budget with Detailed Breakdown

## Revised Budget with Detailed Breakdown

a) Staff cost	
1. Research assistant: HK\$15,200/mo x 16 x 1.05 (note 1)	255,360.00
2. Physical fitness tester: 4 testers x HK\$180 /hr x 10 hours (for 100 subjects) x 2 phases (pre- & post-test)	14,400.00
b) Equipment	
1. Computer	6,000.00
2. Server for hosting the VT programme (note 2)	10,000.00
c) Services	
1. Program modification service by IT company	75,000.00
2. Domain name annual fee for http://www.vt.hk (\$250 per year)	500.00
3. Maintenance of the server	10,000.00
4. SMS service (minimum package: \$5,000 set-up fees + \$5,000 for 10,000 messages per month, minimum x 6 months contract) (note 3)	35,000.00
5. Blood test (\$200 @ for 100 subjects x 2 phases [pre- & post-])	40,000.00
6. Administrative & Financial services support Research Admin. Services, Staff Appointment and Payroll Services, Faculty/Dept Admin Services, Budget/financial statements, auditing, cash receipts, purchasing and payments ...etc	12,600.00
d) Works	---
e) General Expenses:	
1. Souvenir and incentives for subjects (each participants will receive a HK\$12 souvenir; for 650 participants)	7,800.00
2. Consumable and small items for fitness test	8,000.00
3. Consumable for lab testing	5,000.00
4. Subject recruitment (Leaflets, posters, advertisement)	6,000.00
5. Workshops and seminars materials (posters, mailing, banners ...etc)	4,340.00
6. Copying, stationeries, promotion materials, certificates ...etc	6,500.00
f) Contingency	5,800.00
<b>Total:</b>	<b>502,300.00</b>

Note: 1. Only 16 months of salary will be paid for the 18 months project. 2. The original budget for renting a server for 18 months has been deleted, and changed to acquiring a permanent server so that the service can be provided even after the 18-month project period. 3. The cost for sms service provided by the telecom company is a minimum package.



## 8. Evaluation Parameters and Method

A sample of 100 participants will be assessed in their pre-test and post-test of the following parameters, to see if there are any improvements:

- i) Blood profile: Fasting blood glucose, HDL, LDL, total cholesterol and triglycerides (Blood test)
- ii) Body composition and physical fitness field test parameters: Body weight, height, BMI, blood pressure, waist and hip circumferences, skinfolds, handgrip, push-up, sit-and-reach, running test (Carried out by trained physical fitness testers). For safety reasons, an informed consent describing the objectives, procedures, potential risk, and safety precaution will be provided prior to testing. A health-screening questionnaire, the Physical Activity Readiness Questionnaire (PAR-Q) will be completed. Only students who have no known cardiovascular / skeletal risk will be tested. Trained fitness testers from the Chinese University of Hong Kong or the Physical Fitness Association of Hong Kong will be recruited to execute the tests at the participated schools. Certified first-aider will be presented during the tests. Prior to exercise testing, standard warm-up procedures will be provided. Ethics approval of the study protocol will be obtained from the Clinical research Ethic Committee of CUHK.

Exercise compliance of 500 participants will also be collected. This is to measure how the participant could adhere to the exercise prescription chosen by themselves. After their exercise prescription is started, they will be invited to report their progress, exercise time and exercise heart rate via internet or PDA. In the VT program version for secondary school students, we will try to allow the students to report exercise compliance via mobile phone SMS and/or email and/or facebook as this way is more convenient for the users. All participants, teachers and principals will be invited to give any comments about the program as evaluation. Six months after the completion of the exercise prescription, a maintenance questionnaire will be administered to see if the students still keep the exercise habit on their own.

Statistical analysis will be carried by the SPSS (Statistical Package for the Social Sciences) software. Means and standard deviations of the physical characteristics, initial and post-intervention measured variables and blood lipids profiles for both groups will be computed for men and women separately. For both pre-and post-measurements, differences in exercise metabolic cost ( $VO_2$ ) between groups will be analyzed by two-way (groups x gender) ANCOVA using age as covariate. Subsequent univariate and Scheffee tests will be conducted as post hoc procedures when significant MANCOVA results were found. Repeated measures ANCOVA (age as covariate) will be conducted to compare the difference in absolute and relative metabolic rate between the two groups. Two-way (group x pre-post) Repeated Measures MANCOVA and ANCOVA will be conducted to compare changes of the dependent variables, for men and women separately. Same post hoc procedures were implemented when significant results were found.

## 9. Expected Deliverables and Outcomes

The VT website itself is the major output of the project, which is accessible for all internet users. Other deliverables include conference papers and journal papers upon the completion of the project and data analysis. Results of the intervention may be disseminated through press conference. Promotion flyers / posters will be used to introduce the program to the students.

## 10. Dissemination / Promotion Activities

Leaflets, press conference and workshops about the program will be held for the school teachers to disseminate the information about it.

## 11. Sustainability of the Outcomes of the Project

After the development of the program, this online program will be available for all internet users free of charge and the maintenance cost is minimal, just HKD\$200-300 / year for web domain name subscription. Cost for other features of the program, such as SMS service may be borne by the users at their own discretion. The VT website itself is also of high commercial value where it may attract sponsorship and become financially sustainable itself thereafter.

## 12. References

AHA/ACC Scientific Statement: Assessment of Cardiovascular Risk by Use of Multiple-Risk-Factor Assessment Equations, #71-0177 *Circulation*. 1999;100:1481-1492 and *JACC* October 1, 1999.

American College of Sports Medicine (2000). *ACSM's Guidelines for Exercise Testing and Prescription* (6th ed.). Baltimore, MD: Lippincott Williams & Wilkins.

Hui, S.C. (2001). Criterion-related validity of a 0-10 scale physical activity rating in Chinese youth. *Proceedings of 2001 Asia-Pacific Rim Conference on Exercise and Sports Science: The New Perspective of Exercise & Sports for the Better Life in the 21st Century*, Seoul National University, Seoul, Korea, July 6-8. pp.159.

Hui, S.C. (2004). Current perspectives on health and physical activity in Hong Kong: A review. *Journal of Physical Activity and Health*, 1(1): 56-70.

Hui, S.C., Sum, K.W., & Chan, W.K. (2005). A report for survey study on students' physical fitness and their attitude towards physical education 2004-05 (Secondary school). Education and Manpower Bureau, Hong Kong SAR.

Hui, S.C., & Sum, K.W. (2006). A report for the study of the physical fitness test for the community. 170pp. The Leisure and Cultural Services Department, Hong Kong SAR.

Hui, S.C. & Sum, K.W. (2007). CUHK Sports Science and Physical Education Department: Releases survey results on childhood obesity in Hong Kong. 25-May-2007. Press release available online at: <http://www.cuhk.edu.hk/cpr/pressrelease/070525e.htm>

Hui, S.C. (2007). Development of virtual trainer for exercise promotion. Conference proceeding for the SMART (Sports Medicine and Rehabilitation Therapy) Convention 9-10 June 2007. p.22.

Johns, D., & Ha, A. (1999) Home and recess physical activity of Hong Kong children. *Research Quarterly for Exercise and Sport*, 70(3): 319-323.

Lonsdale, C.S., Ha, A., & Sum, R.K.W. (2007). A cross-cultural examination of factors influencing the motivation and physical activity of high school physical education students. (In press).

World Health Organization. (2000). *The Asia-Pacific Perspective: Redefining Obesity and Its' Treatment*: Health Communications Australia.

## Appendix A -- Summary of the Existing Virtual Trainer Program

### Basic Feature:

1. Provide online health and fitness evaluation.
2. Based on results of health and fitness evaluation, a personalized exercise training program can be generated. Then the program will be incorporated into a "Scheduler" program so that client can see their exercise plan in a calendar format.
3. A personal webpage will be created for each participant to view their training program and training schedule (Scheduler), and for client to report their progress. A virtual character, the virtual trainer, will be provided for each client according to their selection from a list of characters in different styles.
4. Personal electronic reminder, in the form of e-mail messages, mobile phone messages and/or Palm/Pocket PC messages, will be disseminated daily to encourage compliance of exercise.
5. Post training health/fitness evaluation will be provided.
6. Incentives will be provided such as cash coupons, exercise equipment or fitness shoes, etc.

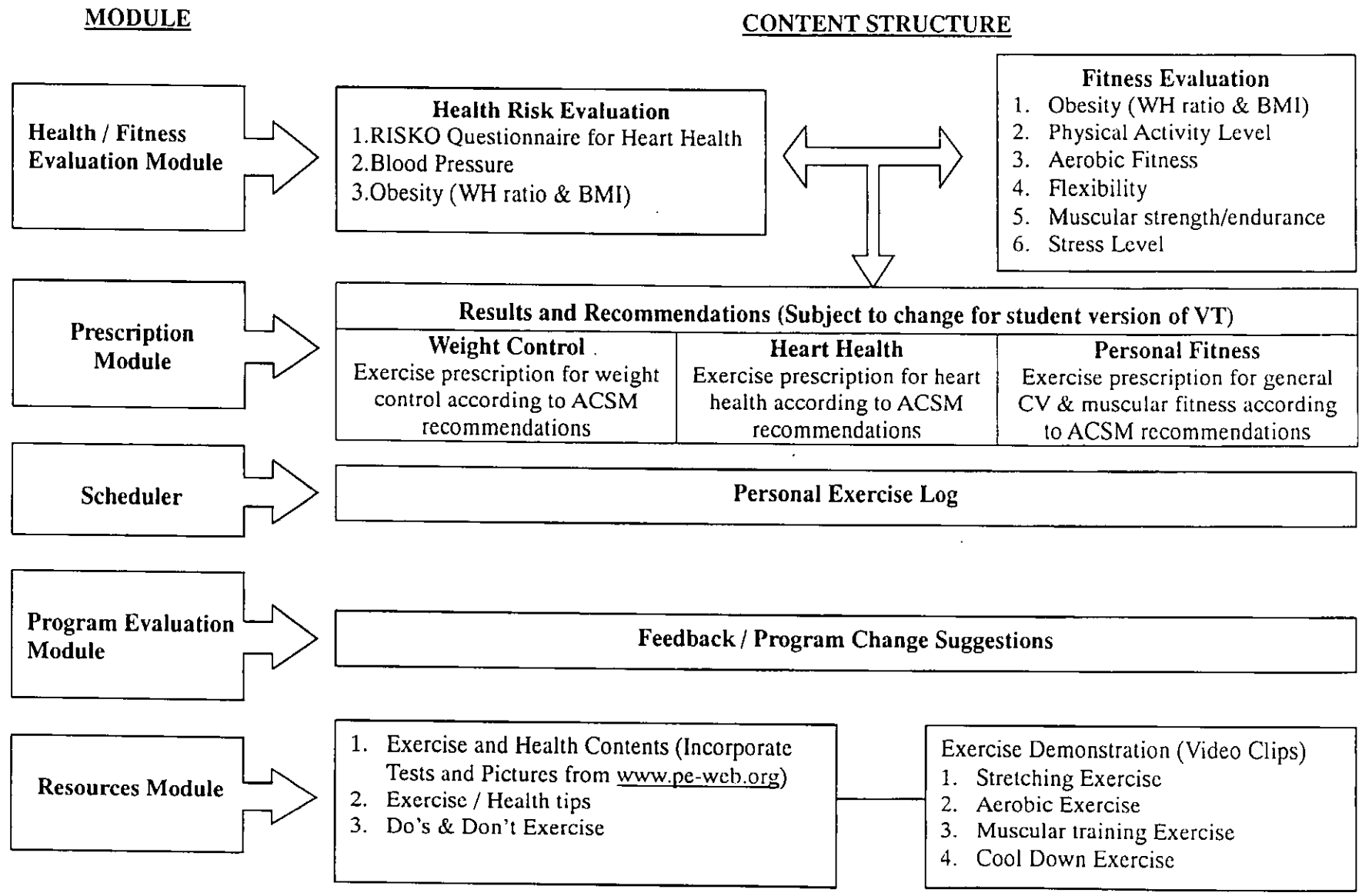
### Special Health-Improvement Programs (Examples only, need to be modified for student version):

- A. Virtual Trainer for Weight Control.
- B. Virtual Trainer for Heart Health.
- C. Virtual Trainer for Personal Fitness.

### Resources Requirement:

1. An online health-fitness evaluation computer program has to be developed.
2. Internet integrated with telecommunication technology for generating the e-mail and mobile reminding messages.
3. Incentive rewards/prizes.
4. Tailor-made exercise program for each specific health-improvement program.
5. Other supporting information on exercise (text, pictures, and/or video clips) like warm-up stretching, exercise safety, tips for walking and jogging exercise, muscle conditioning exercise, etc.
6. Diet tips.

# Virtual Trainer Program



## Virtual Trainer Content Description

- I. **Health Risk Evaluation**
  - RISKO for Heart Health -- A questionnaire (developed by American Heart Association, 1999) to evaluate the likelihood of developing heart disease.
  - Blood Pressure -- client need to input their blood pressure values measured by doctor/nurse, or self-administered at home. Then the program will tell the client how high the risk in hypertension.
  - Obesity -- client need to input their body height and weight then a BMI will be generated to reflect their level of obesity.
- II. **Fitness Evaluation**
  - Obesity (BMI) -- client need to input their body weight and height, then a body mass index (BMI) value can be calculated to evaluate the level of obesity.
  - Physical Activity Level -- A questionnaire to evaluate the level of physical activity. Then the program will inform the client if he/she is getting sufficient level of activity to maintain health.
  - Aerobic Fitness -- A questionnaire to estimate cardio-respiratory fitness
  - Flexibility -- client will be instructed to perform flexibility test and input their test result into the program for low back health evaluation.
  - Muscular strength/endurance -- client will be instructed to perform curl-up and push up tests and input their test result into the program for muscular fitness evaluation.
  - Stress Level -- A questionnaire to evaluate stress level (mental health)
- III. **Results & Recommendations**

Based upon the health, fitness and diet evaluation (any one aspect or all aspects), results statements which include major health problems, severity of health problem, and recommendation for lifestyle modifications will be provided. Then clients may select one of the exercise training programs described below to improve their health condition.
- IV. **Exercise Training Program**

In each health aspect, descriptions on definition, health impact, prevalence of the specific health problem in Hong Kong, and beneficial effect of exercise will be provided. Then recommendation of exercise training will be suggested. Clients will be guided to create a personalized exercise program and will be incorporated into a personal exercise log. Also, clients will be encouraged to equip a digi-walker and a heart rate monitor to keep tracking the amount of daily activity and exercise intensity. Clients are required to complete the exercise log periodically, and automatic incentive messages will be generated to remind/encourage the compliance of exercise.
- V. **Exercise Demonstration (Video Clips)**

Video clips on exercise demonstration including stretching exercise, aerobic exercise (different types of walking, jogging, running, low/hi impact aerobics, chair aerobics, aqua-robics etc.), muscular training exercise (machine weight training, free weight, and body weight exercise), and cool down exercise will be provided.
- VI. **Exercise/Health Tips**

Daily exercise/health tips messages will be generated by the program.
- VII. **Dos & Don't Exercise**

The top ten dangerous exercises and other potential danger exercise will be introduced. Suggestions on alternative exercise will also be provided.
- VIII. **Personal Exercise Log**

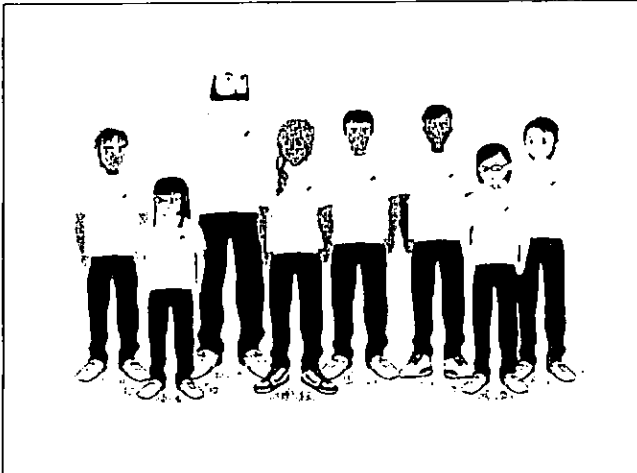
When clients created a personalized exercise training program, the program will be merged into a personal calendar to keep tracking the record and progress of exercise program. The exercise log will also be used for post training evaluation.
- IX. **On-line Progress Evaluation**

When a specified training period is completed, clients will be asked to perform the health/fitness evaluation again (selected items) so that a progress evaluation can be given.
- X. **Automatic Incentive Messages**

Once a client start the Online Health/Fitness Training program, a daily incentive messages will be generated by the computer to encourage the compliance of exercise training program.

Appendix B -- Illustrations showing the outlook of the existing VT program

Website: <http://www.vt.hk>



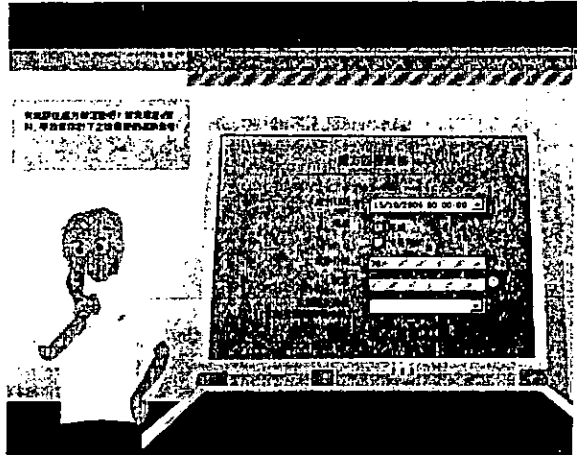
The eight virtual trainers (4 ladies and 4 men). Each one of them has different profiles, professional qualifications and strengths.



The outlook of the VT interface.



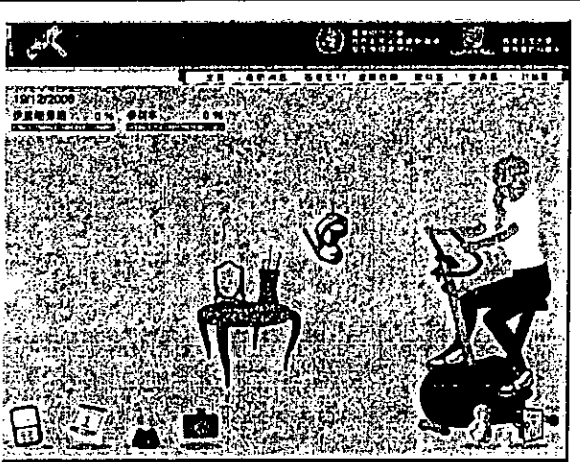
The interface of the health / fitness evaluation module of VT.



The interface of the program evaluation module of VT.



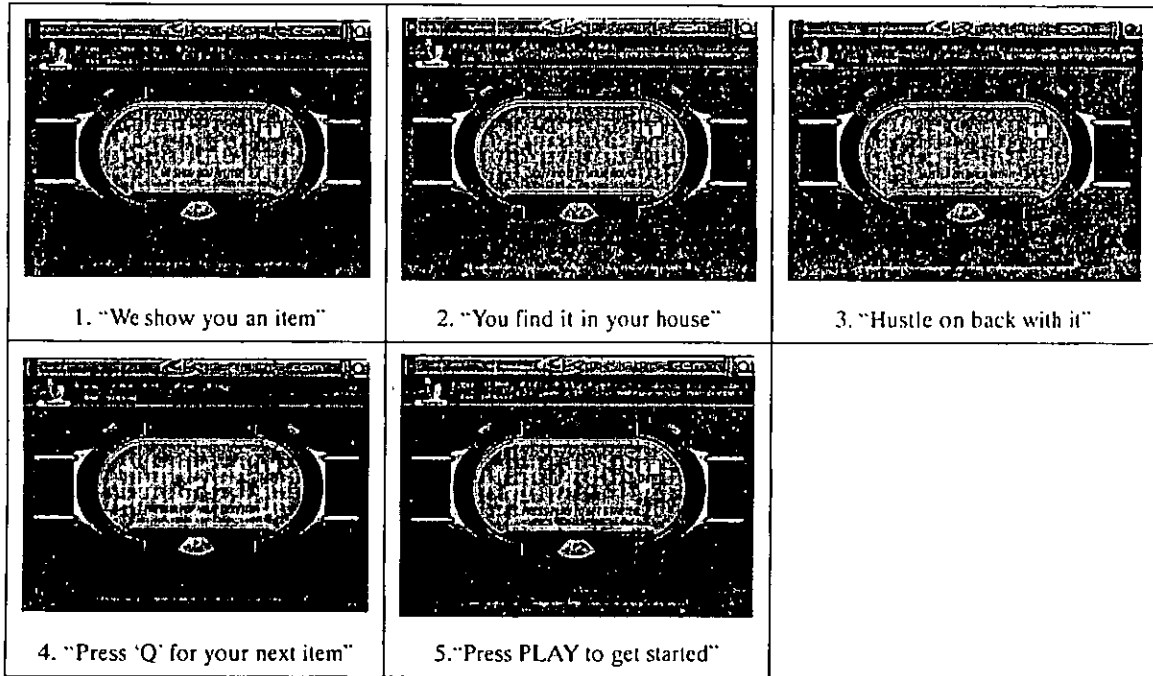
Example of a virtual trainer room.



Another example of a virtual trainer room.

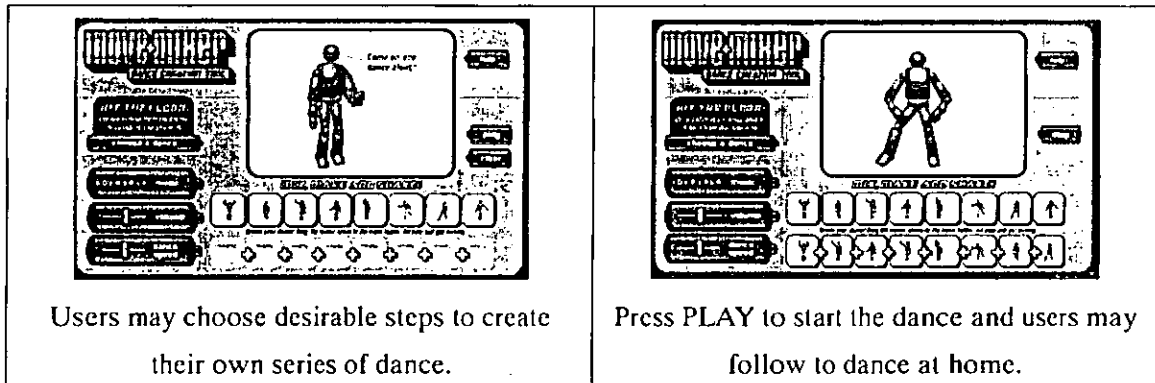
Appendix C – Examples of Online Fitness Exercise Currently Available in the Internet

1. Object searching game – “Scavenger Hunt” (<http://kidnetic.com/Kore/Hunt.aspx>)



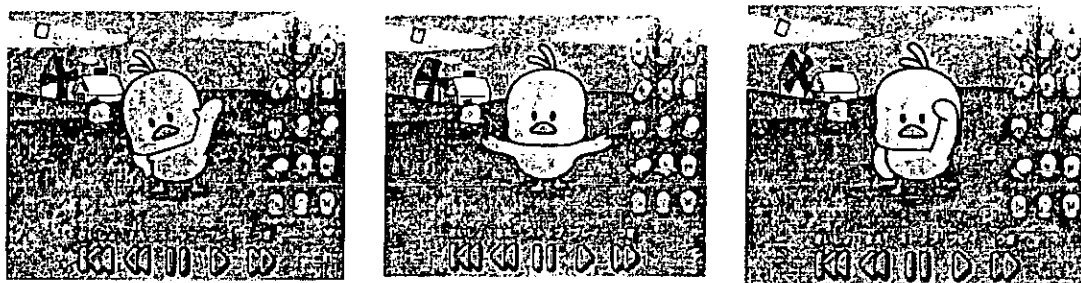
2. Home aerobics

– “Move Mixer: Dance Creation Tool” (<http://kidnetic.com/Kore/Move.aspx>)



3. Chicken dance (<http://www.chikinramen.com/exercise/exercise43.swf>)

Users may follow the dance of the chicken and dance at home.



## Report Submission Schedule

### 遞交報告時間表

I / My school / My organization commit(s) to submit proper reports in strict accordance with the following schedule:

本人/本校/本機構承諾準時按以下日期遞交合規格的報告：

<b>Project Management</b> 計劃管理		<b>Financial Management</b> 財政管理	
Type of Report and covering period 報告類別及涵蓋時間	Report due day 報告到期日	Type of Report and covering period 報告類別及涵蓋時間	Report due day 報告到期日
Progress Report 計劃進度報告 1/9/2010 - 28/2/2011	31/3/2011	Interim Financial Report 中期財政報告 1/9/2010 - 28/2/2011	31/3/2011
Progress Report 計劃進度報告 1/3/2011 - 31/8/2011	30/9/2011	Interim Financial Report 中期財政報告 1/3/2011 - 31/8/2011	30/9/2011
Final Report 計劃總結報告 1/9/2010 - 29/2/2012	31/5/2012	Final Financial Report 財政總結報告 1/9/2011 - 29/2/2012	31/5/2012