

FITNESSGRAM

ACTIVITYGRAM Logging Chart

Name _____ Age _____ Teacher _____ Grade _____

Record the *primary* activity you did during each 30-minute interval during the day using the list at the bottom of the page. Then select an intensity level that best describes how it felt (Light: "Easy"; Moderate: "Not too tiring"; Vigorous: "Very tiring"). *Note:* All time periods of rest should have "Rest" checked for intensity level.

Time	Activity	Rest	Light	Mod.	Vig.	Time	Activity	Rest	Light	Mod.	Vig.
7:00						3:00					
7:30						3:30					
8:00						4:00					
8:30						4:30					
9:00						5:00					
9:30						5:30					
10:00						6:00					
10:30						6:30					
11:00						7:00					
11:30						7:30					
12:00						8:00					
12:30						8:30					
1:00						9:00					
1:30						9:30					
2:00						10:00					
2:30						10:30					

Categories of Physical Activities

Lifestyle activity	Active aerobics	Active sports	Muscle fitness activities	Flexibility exercises	Rest and inactivity
"Activities that I do as part of my normal day"	"Activities that I do for aerobic fitness"	"Activities that I do for sports and recreation"	"Activities that I do for muscular fitness"	"Activities that I do for flexibility and fun"	"Things I do when I am not active"
1. Walking, bicycling, or skateboarding	11. Aerobic dance activity	21. Field sports (baseball, softball, football, soccer, etc.)	31. Gymnastics or cheer, dance or drill teams	41. Martial arts (tai chi)	51. Schoolwork, homework, or reading
2. Housework or yard work	12. Aerobic gym equipment (stairclimber, treadmill, etc.)	22. Court sports (basketball, volleyball, hockey, etc.)	32. Track and field sports (jumping, throwing, etc.)	42. Stretching	52. Computer games or TV/ videos
3. Playing active games or dancing	13. Aerobic activity (bicycling, running, skating, etc.)	23. Racket sports (tennis, racquetball, etc.)	33. Weightlifting or calisthenics (push-ups, sit-ups, etc.)	43. Yoga	53. Eating or resting
4. Work—active job	14. Aerobic activity in physical education	24. Sports during physical education	34. Wrestling or martial arts (karate, aikido)	44. Ballet dancing	54. Sleeping
5. Other	15. Other	25. Other	35. Other	45. Other	55. Other

FIGURE B.14

From *FITNESSGRAM/ACTIVITYGRAM Test Administration Manual, Fourth Edition* by The Cooper Institute, 2005, Champaign, IL: Human Kinetics.

FITNESSGRAM

Personal Fitness Record

Name _____ School _____ Grade _____ Age _____ Ht _____ Wt _____

	Date:		Date:		Date:	
	Score	HFZ	Score	HFZ	Score	HFZ
Aerobic capacity:						

Curl-up						
Trunk lift						
Upper body strength:						

Flexibility:						

Skinfolds:						
Triceps						
Calf						
Total						

Note: HFZ indicates you have performed in the Healthy Fitness Zone.

I understand that my fitness record is personal. I do not have to share my results. My fitness record is important since it allows me to check my fitness level. If it is low, I will need to do more activity. If it is acceptable, I need to continue my current activity level. I know that I can ask my teacher for ideas for improving my fitness level.

FIGURE B.13

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Class Score Sheet

Teacher _____

Page number _____ Grade _____

Class _____

Test date _____

ID#	Name	Birth date	Sex	Height	Weight	Aerobic capacity	Curl-up	Upper body	Trunk lift	Flexibility L/R	Skinfolds	
											Triceps	Calf

FIGURE B.11

From FITNESSGRAM/ACTIVITYGRAM Test Administration Manual, Fourth Edition by The Cooper Institute, 2005, Champaign, IL: Human Kinetics.