



Physical Activity Questionnaire (301) 891-8887(P)/(301) 891-4969 (Fax)(RP)



Name _____

1. How far do you usually walk per day? _____ blocks/day
2. Do you drive a car or take the train when traveling?
 - a. Can you exit at an earlier train station and walk the remaining distance to your destination easily?
 - b. Can you park any further away from your destination door than you choose to right now?
3. Does the building where you work have stairs?
4. How many flights of stair do you climb per day? _____ flights/day
5. How much of your day is spent sitting in one place? _____ hours/day
6. Do you take walks or break up your day with any physical activity?
7. At least once per week, do you engage in regular physical activity like brisk walking, jogging, bicycling, swimming, etc long enough to work up a sweat?
 NO YES Activity _____
8. How many hours do you spend watching TV per week? _____ hours/wk.
9. How many hours do you spend using your computer? _____ hours/week
10. What exercise/activity plan have you enjoyed and how consistent were you with it over time?

<u>sport/activity</u>	<u>avg. time</u>	<u>years of participation</u>

11. What activities would you like to try?
 jogging yoga tennis cardio/aerobics fitness training
 biking Pilates swimming resistance/weight training
 rowing bowling hiking fitness class roller/ice skating
12. Do you start exercise programs and then find yourself unwilling to stick with them? _____
13. How much time are you willing to devote to an exercise program? _____