

FRESNO STATE ON THE MOVE PRE-TEST – FALL 2011

Name: _____ Email: _____ Campus M/S _____

PAST PARTICIPATION

Did you participate in Fresno State on the Move in 2008 (received kit w/ RED SHOELACES)? YES NO

Did you participate in Fresno State on the Move in 2010 (received Wellness@Work visor)? YES NO

SELF-ASSESSMENT & GOAL-SETTING

1. During a *typical* week, how many *times* do you perform vigorous (heavy lifting, digging, running) or moderate (carrying light loads, bicycling at regular pace) activity for over 10 minutes? *DO NOT INCLUDE WALKING.*

During those times, how long to you typically spend in those activities? _____ hours _____ minutes

During a *typical* week, how many times do you walk for at least 10 minutes at a time? _____

During those times, how long do you typically spend walking? _____ hours _____ minutes

2. Please rate your energy level over the last two weeks.

- Low
- Somewhat low
- Medium
- Somewhat high
- High

3. What are your wellness goals? (check all that apply)

- Lose weight
- Increase activity level
- Quit drinking
- Manage stress better
- Eat a more healthful diet
- Other (please list)

4. What is your physical activity goal for FRESNO STATE ON THE MOVE?

- LEVEL 1 – GET MOVING** - Exercise for a minimum of 500 minutes a month
- LEVEL 2 – STEP IT UP A NOTCH** - Exercise for a minimum of 600 minutes per month
- LEVEL 3 – ABOVE AND BEYOND** - Exercise for a minimum of 750 minutes a month and set a goal that increases the level of intensity when you are exercising by incorporating intervals of high intensity cardio, variety, or increased distances.

Will you be able to join us at the KICK-OFF WALK WITH PRESIDENT WELTY on Wednesday, October 12, 2011 at noon in front of the fountain by Kennel Bookstore? YES NO

WEAR YOUR RED SHOELACES FOR WELLNESS!

Return this Pre-Test to **WELLNESS@WORK** at M/S LS86