

## Goal Setting Questionnaire

<b>DEGREE OF SATISFACTION with Current Level of Fitness</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
check the best number of each aspect of your current fitness level, using the scale: <b>4 = very satisfied 3 = satisfied 2 = dissatisfied 1 = very dissatisfied</b>				
CARDIOVASCULAR ENDURANCE				
MUSCULAR STRENGTH AND ENDURANCE				
FLEXIBILITY OF HAMSTRINGS AND LOW BACK				
AMOUNT OF ENERGY				
ABILITY TO COPE WITH TENSION AND STRESS				
ABILITY TO RELAX				
ABILITY TO GET A GOOD NIGHT'S REST				
LOW BACK FUNCTION				
PHYSICAL APPEARANCE/BODY WEIGHT				

<b>AREAS OF IMPROVEMENT</b> <i>Take a few moments to think about the areas of your life which you feel need improvement. Briefly list areas of improvement below:</i>
1. Risk of a Health Problem:
2. Specific Physical Problem:
3. Appearance of Particular Part of Body:
4. Ability to Participate in a Specific Sport OR Daily Function:
5. Other: