

Important Information for Physical Fitness Testing 2015-16

General Information

- Required in Grades 5,7, and 9
- Testing Window for Fresno Unified: **February 2 thru April 29** (Return scanners to Tami Whaley by May 6)
- All schools MUST administer the test including Alternative and Charter Schools.
- Individual results **MUST** be given to each student after testing (students will record their own data on the Fitnessgram Personal Fitness Record form provided).
- PE Scanners will be sent together to PE Test Coordinators via intra-district mail.
- All completed scanners MUST include Height and Weight or the test will not be scored.
- Do not allow students to fill in scanners (Height 2ft and Weight 999lbs is not valid)
- It is important that students be conditioned and practice adequately before taking the test. Have the students warm-up and stretch prior to each test.
- To maximize safety, determine if any students have medical conditions that must be addressed prior to each test.
- Be aware of the current air quality. This can be found on the district's home website.
- Administer only one test per day (height and weight measurements can all be completed on the same day).
- Scores will be based on the student's age on the date when the first fitness test is administered to the student. **Therefore, please include the date testing began, along with your school name, on the Yellow coversheet provided for returning completed scanners.** This information goes to Tami Whaley in REA.

Resources:

***Testing Administration Manual**

Comes with testing material package (order at Human Kinetics)

<http://www.humankinetics.com/physicaleducationassessment/>

***Test Training**

Use videos on the California Department of Education Website

<http://www.pftdata.org/training.aspx>

***Other questions**

California Department of Education Website

<http://www.pftdata.org/training.aspx>

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FITNESSGRAM Fitness Areas, Test Options, and Equipment^{1,2}

Fitness Areas					
Aerobic Capacity ³	Body Composition	Muscular Strength, Endurance, and Flexibility			
		Abdominal Strength and Endurance	Trunk Extensor Strength and Flexibility	Upper Body Strength and Endurance	
Test Options and Equipment					
<ul style="list-style-type: none"> ■ One-Mile Run <ul style="list-style-type: none"> • Flat, measured running course • Stopwatch • Scale • Ruler (stadiometer) or tape measure ■ PACER⁴ (Progressive Aerobic Cardiovascular Endurance Run) <ul style="list-style-type: none"> • Flat, nonslippery surface 15 or 20 meters in length • CD or cassette player with adequate volume • CD or audiocassette with music/timing • Measuring tape • Marker cones ■ Walk Test <ul style="list-style-type: none"> • Flat, measured course • Stopwatch • Scale • Heart rate monitor (optional) 	<ul style="list-style-type: none"> ■ Body Mass Index <ul style="list-style-type: none"> • Scale • Ruler (stadiometer) or tape measure 	<ul style="list-style-type: none"> ■ Curl-Up⁴ <ul style="list-style-type: none"> • Gym mat • 3-inch measuring strip for 5 to 9 year olds or 4.5-inch measuring strip for students older than 9 years of age • CD or cassette player with adequate volume • CD or audiocassette with cadence 	<ul style="list-style-type: none"> ■ Trunk Lift⁴ <ul style="list-style-type: none"> • Gym mat • Yard stick or 15-inch ruler 	<ul style="list-style-type: none"> ■ Push-Up⁴ <ul style="list-style-type: none"> • Gym mat • CD or cassette player with adequate volume • CD or audiocassette with cadence ■ Modified Pull-Up <ul style="list-style-type: none"> • Gym mat • Modified pull-up stand with elastic band ■ Flexed-Arm Hang <ul style="list-style-type: none"> • Horizontal bar • Chair or stool • Stopwatch 	<ul style="list-style-type: none"> ■ Back-Saver Sit and Reach⁴ <ul style="list-style-type: none"> • Sit-and-reach box ■ Shoulder Stretch

¹ FITNESSGRAM is a registered trademark of The Cooper Institute.

² All of the test options may require pencils and score sheets to record scores.

³ Height and weight (i.e., Body Mass Index) are needed to estimate a student's Aerobic Capacity.

⁴ FITNESSGRAM recommends this test as the test option for the fitness area; however, the California Department of Education (CDE) does not have a position regarding which test option to administer to students.

FUSD PHYSICAL EDUCATION 2015-16

Student Personal Fitness Record

Name _____ School _____

Grade _____ Age _____ Height (Ft/In) _____ Weight _____

	Date:		Date:		Date:	
	Score	HFZ	Score	HFZ	Score	HFZ
<u>Aerobic Capacity:</u>						
• Pacer						
• One-mile Run						
• Walk Test						
<u>Abdominal Strength and Endurance:</u>						
• Curl-Up						
<u>Trunk-extensor Strength & Flexibility:</u>						
• Trunk Lift						
<u>Upper Body Strength & Endurance:</u>						
• Push-Up						
• Modified Pull-up						
• Flexed-Arm Hang						
<u>Flexibility:</u>						
• Back-Saver Sit & Reach						
• Shoulder Stretch						
<u>Body Composition:</u>						
• Body Mass Index						

**Fresno Unified School District
Research, Evaluation and Assessment**

Teacher Instructions for Bubbling Physical Fitness Scanner Sheets

Spring 2016

Please complete the scanner sheets by bubbling in the required information. Following are a few points to remember:

- **For All Students:**
 1. Please note the state maximum reporting limits in the upper right-hand portion of the scanner sheets. If students score higher than the state reporting maximums, scores will be reduced to these amounts when reported to the state.

- **For New Students** (i.e., no Pre-id scanner sheet)
 1. Use an original blank scanner sheet for new students (do not copy). If additional scanners are needed please contact Tami Whaley 457-3851.
 2. **Write:** student name, school name, teacher name, and room/period on the top of the scanner sheet.
 3. **Bubble:** the student id number, school number and grade.

- **Return completed scanner sheets to your Test Site Coordinator, and he or she will send them to REA.**

Please do not send directly to REA.

STUDENT NAME
SCHOOL NAME
TEACHER NAME
ROOM/PERIOD

STUDENT ID #										Sch#	GR	
0	0	0	0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9	9	9

State Reporting Range Maximums:

One Mile: 59:59	Arm Hang: 90 seconds
Pacer: 190 laps	Sit & Reach Left: 12 inches
Walk Test: 59:59	Sit & Reach Right: 12 inches
Heart Rate: 250 beats	Shoulder Stretch Left: Yes or No
Curl-Up: 75	Shoulder Stretch Right: Yes or No
Trunk Lift: 12 inches	Height: 7ft.
Push-Up: 75	Weight: 400 lbs.

Measures exceeding these amounts on this bubble form will be reduced to these maximums for state reporting purposes.

PHYSICAL FITNESS TEST

Please bubble all leading zeros.

MARKING INSTRUCTIONS



IMPROPER MARKS



PROPER MARK



ERASE ALL CHANGES
CLEANLY AND COMPLETELY

AEROBIC CAPACITY									
ONE MILE		OR	20-METER PACER		OR	WALK TEST			Heartbeats per min
MIN.	SEC.		(number of laps)			MIN.	SEC.		
0	0		0	0		0	0	0	0
1	1		1	1		1	1	1	1
2	2		2	2		2	2	2	2
3	3		3	3		3	3	3	3
4	4		4	4		4	4	4	4
5	5		5	5		5	5	5	5
6	6		6	6		6	6	6	6
7	7		7	7		7	7	7	7
8	8		8	8		8	8	8	8
9	9		9	9		9	9	9	9

MUSCLE STRENGTH (BOTH TESTS REQUIRED)			
ABDOMINAL CURL-UP		TRUNK LIFT	
(number completed)		(number of inches)	
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

UPPER BODY STRENGTH AND ENDURANCE							
PUSH-UP 90 degrees		OR	MODIFIED PULL-UP		OR	FLEXED-ARM HANG	
(number completed)			(number completed)			(number of seconds)	
0	0		0	0		0	0
1	1		1	1		1	1
2	2		2	2		2	2
3	3		3	3		3	3
4	4		4	4		4	4
5	5		5	5		5	5
6	6		6	6		6	6
7	7		7	7		7	7
8	8		8	8		8	8
9	9		9	9		9	9

FLEXIBILITY CAPACITY							
SIT & REACH (inches)			OR	SHOULDER STRETCH (Fingers touch? Y or N)			
Left Side		Right Side		Left Side		Right Side	
0	0	0		Y	N	Y	N
1	1	1		0	0	0	0
2	2	2					
3	3	3					
4	4	4					
5	5	5					
6	6	6					
7	7	7					
8	8	8					
9	9	9					

MANDATORY			
HEIGHT		WEIGHT	
FT.	IN.	LBS.	
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9