

LAB 3.3 • PLAN YOUR CARDIORESPIRATORY FITNESS GOALS AND PROGRAM

Name: _____ Date: _____

Instructor: _____ Section: _____

Materials: Results from cardiorespiratory fitness assessments, calculator, lab pages.

Purpose: To learn how to set appropriate cardiorespiratory fitness goals and create a personal cardiorespiratory fitness program designed to meet those goals.

SECTION I: SHORT- AND LONG-TERM GOALS

Create short- and long-term goals for cardiorespiratory fitness. Be sure to use SMART goal-setting guidelines (specific, measurable, action-oriented, realistic, time-oriented). Select appropriate target dates and rewards for completing your goals.

Short-Term Goal (3–6 Months)

Target Date: _____

Reward: _____

Long-Term Goal (12+ Months)

Target Date: _____

Reward: _____

SECTION II: CARDIORESPIRATORY FITNESS OBSTACLES AND STRATEGIES

1. What **barriers or obstacles** might hinder your plan to improve your cardiorespiratory fitness? Indicate your top three obstacles below:

- a. _____
- b. _____
- c. _____

2. Overcoming these barriers/obstacles to change will be an important step in reaching your goals. Write down three **strategies** for overcoming the obstacles listed above:

- a. _____
- b. _____
- c. _____

SECTION III: GETTING SUPPORT

- 1.** List resources you will use to help you change your cardiorespiratory fitness:

Friend/partner/relative: _____

School-based resource: _____

Community-based resource: _____

Other: _____

- 2.** How will you use these supportive resources to help you meet your cardiorespiratory fitness goals?

SECTION IV: CARDIORESPIRATORY FITNESS PROGRAM REFLECTIONS

- 1.** How realistic are the short- and long-term target dates you have set for achieving your cardiorespiratory fitness goals?

- 2.** How many days per week are you planning to work on your cardiorespiratory fitness program? _____

- 3.** What types of workouts are you planning to try?

- 4.** Do you have a workout partner? Do you plan to work with a workout partner, personal trainer, or instructor to help get you started?

SECTION V: CARDIORESPIRATORY TRAINING PROGRAM DESIGN

Plan a four-week cardiorespiratory training program, using resources available to you (facility, instructor, text) and completing the following training calendar (A = activity, I = intensity, T = time).

Four-Week Cardiorespiratory Training Program						
Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
A:	A:	A:	A:	A:	A:	A:
I:	I:	I:	I:	I:	I:	I:
T:	T:	T:	T:	T:	T:	T:
Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
A:	A:	A:	A:	A:	A:	A:
I:	I:	I:	I:	I:	I:	I:
T:	T:	T:	T:	T:	T:	T:
Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
A:	A:	A:	A:	A:	A:	A:
I:	I:	I:	I:	I:	I:	I:
T:	T:	T:	T:	T:	T:	T:
Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
A:	A:	A:	A:	A:	A:	A:
I:	I:	I:	I:	I:	I:	I:
T:	T:	T:	T:	T:	T:	T:

SECTION VI: TRACKING YOUR PROGRAM AND FOLLOWING THROUGH

- Goal and Program Tracking:** Use the following chart to monitor your progress. Change the activity, intensity, or time of your workout plan to reflect your progress as needed.
- Goal and Program Follow-up:** At the end of the course or at your short-term goal target date, reevaluate your cardiorespiratory fitness and ask yourself the following questions:
 - Did you meet your short-term goal or your goal for the course? If so, what positive behavioral changes contributed to your success? If not, which obstacles blocked your success?
 - Was your short-term goal realistic? What would you change about your goals or training plan?

Five-Week Cardiorespiratory Training Log						
	Dates	Activity	Time	Av. HR	RPE	Comments
Week 1						
Week 2						
Week 3						
Week 4						
Week 5						

To submit the completed lab, save the form to your computer and email it to your instructor or upload it to their digital dropbox as directed.