



# CEBU INSTITUTE OF TECHNOLOGY

---

## UNIVERSITY

### PATHFit 1

### MOVEMENT COMPETENCY TRAINING



## FITNESS PORTFOLIO

Name: \_\_\_\_\_

Course & Year: \_\_\_\_\_

Section: \_\_\_\_\_

Semester & A.Y.: First Semester 2025-2026

DR. NELMA M. MUAÑA

---

FACULTY – IN – CHARGE

## ACTIVITY 1. Physical Activity Readiness Questionnaire PAR-Q

For most people physical activity should not pose any problem or hazard. PAR-Q has been designed to identify the small number of adults for whom physical activity might be inappropriate or those who should have medical advice concerning the type of activity most suitable for them.

Common sense is your best guide in answering these few questions. Please read them carefully and check the yes or no opposite the question if it applies to you

### Answer with Yes or No

1. Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?
2. Do you feel pain in your chest when you do physical activity?
3. In the past month, have you had chest pain when you were not doing physical activity?
4. Do you lose your balance because of dizziness or do you ever lose consciousness?
5. Do you have a bone or joint problem that could be made worse by a change in your physical activity?
6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
7. Do you know of any other reason why you should not do physical activity?
8. For women only, are you pregnant or suspecting to be pregnant?

### If you answered YES to one or more questions...

if you have not recently done so, consult with your personal physician by telephone or in person before increasing your physical activity and/or taking a fitness test. **DO NOT FORGET to inform your instructor of the items that you answered YES and provide proof like medical certificate if needed.** This is to ensure that you will not be asked to perform activities that you are not allowed to do so.

### If you answered NO to all questions...

If you answered PAR-Q accurately, you have reasonable assurance of your present suitability for an exercise test.

## RATE OF PERCEIVED EXERTION

Before you start challenging your body, it is best to first gauge the extent to which you can perform the designed activities set for this Term. Thus, you are required to perform a Physical Diagnostic Test, a 4-activity workout to be done in 3 sets. After doing this, you will have to rate yourself using a standardized rubric known as **Rate of Perceived Exertion (RPE)**. This is a subjective way of determining the intensity (breathing and heart rate, muscle fatigue and how much you sweat) that you exert while doing your activity.

How to do? *Example, rating yourself with RPE of 6 means that you feel that your heart is beating for approximately 60bpm, while rating yourself with 12 means that you approximate your heart to be beating at 120bpm, which means 2x per second. This means that because of the intensity of the activity, your heart is beating faster, double per second, to meet the demands of the working muscles.* Check out the table below as your guide.

How hard do you feel the exercise is?	
Rating Number	Perceived Exertion (description)
6	Very, very light
7	
8	Very light (You feel comfortable)
9	
10	Light
11	
12	Somewhat hard (You feel tired but you can keep going)
13	
14	Hard
15	
16	Very hard (You feel very tired, and you are pushing yourself to keep going)
17	
18	
19	Very, very hard (This is like the hardest exercise you have ever done)
20	

Source: <http://www.webmd.com/a-to-z-guides/cardiac-rehabilitation-monitoring-your-rating-of-perceived-exertion>

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

## PHYSICAL FITNESS TEST

### ACTIVITY 5: PHYSICAL FITNESS TEST (PRE-TEST)

**NOTE:** The tests included in this activity aim to assess your fitness level in all the components of HEALTH-RELATED Fitness Components. The results and classification will tell you of your truthful and actual fitness level. Therefore, there is no point of you cheating on the methods of performing the tests or changing the results just to aim for a “perfect result” or highest classification. Just do the tests accordingly and be ready to determine whether there is a need for you to improve physically and physiologically, or simply maintain the fitness level that classifies you at this time.

- ✓✓ Read the instructions on how to perform the five (5) HRFC tests.
- ✓✓ Use the scoresheet provided for and perform the indicated tests to include results and corresponding fitness classification (see table per fitness test).
- ✓✓ When done, submit the score sheet to your instructor.

HRFC	NAME OF TEST	RESULT (# of repetitions or duration)	CLASSIFICATION (refer to the tables found in module)
Body Composition	BMI (if weighing scale is available) OR WHR (if tape measure is available)		
Cardiorespiratory Endurance	3-minute Step Test	bpm	
Muscular Strength and Endurance	Crunch Test	reps	
Muscular Endurance – <u>for males only</u>	90 Degree - Push ups	reps	
Muscular Endurance – <u>for females only</u>	Modified Push - ups	reps	
Flexibility	Sit and Reach Wall Test	Which part of the hand?  a. Palms  b. Knuckles  c. Fingertips  d. None	

**Show your BMI computation here:**

BMI Formula: **weight in kg/height in m<sup>2</sup>**

**Example:** if body weight is 55 kg and height is 1.6 m, the BMI is 21.5 (normal weight)

Height in meters: \_\_\_\_\_

Weight in kg.: \_\_\_\_\_

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

**ACTIVITY 4:** Diagnostic Test: To gauge the extent to which you can perform the designed activities set for this term, you are required to perform the following activities and then you will have to rate yourself using Rate of Perceived Exertion (RPE).

Perform warm-up and stretching exercises ensuring that you start by slowly increasing your heart rate followed by stretches of your muscles from neck to ankles.

Resting heart Rate (RHR) \_\_\_\_\_

ACTIVITY	NUMBER OF REPETITIONS OR SECONDS	REMARKS	RPE
1. Jumping Jacks	30 reps	1. Perform in sequence following the 10-sec rest period.	
(10-second rest)			
2. Push-ups	10 reps		
(10-second rest)			
3. Abdominal crunches	15 reps		
(10-second rest)		2. Do 3 sets.	
4. Squat Hold	30 secs.		
(10-second rest)			
<b>OVERALL (still within 6-20)</b>			
<b>EVALUATION:</b> In 2-3 sentences, kindly describe/justify your overall RPE in terms of how you felt when you were doing the activities.			

Please do not forget:

1. Hydrate yourself after completing the activities.
2. Perform your cool down stretching exercises after performing the above mentioned activities.



Purpose: To establish a comprehensive fitness plan of lifestyle activities and self-monitor progress in your plan. ((Note: Before completing the task, you may want to read again the basic concept and exercise prescription instructions.))

## I. EXERCISE CLEARANCE

Is it safe for you to engage in any physical activity or an exercise program?

- ☐ Yes
- ☐ No (If no, please contact your Doctor and make sure to inform your instructor)
- ☐ with some limitations (please specify)
- ☐ others, please specify

I completely understand all the exercise principles, basic fitness concepts, and exercise prescriptions guidelines that I will use in developing and implementing my fitness plan.

- ☐ Yes
- ☐ No

## GOAL SETTING

II. With the help of your **Physical Fitness Test (PFT) results**, identify the areas or needs that you want to improve. Please keep in mind that goals require specific statements that are specific, measurable, attainable, realistic, and time bounded.

### EXAMPLES:

#### **SPECIFIC** - Body Composition

My current BMI computation is **23.4** which falls to at-Risk of Obesity fitness classification. I need to lose **4kg** kilogram to achieve the **Normal/Healthy** fitness classification.

**NOTE:** Avoid indicating "I want to lose some weight"

#### **MEASURABLE**

I need to lose at least **1.3kg** per month to completely loss at least **4kg** in 3 months.

#### **ACHIEVABLE/ATTAINABLE**

This goal is attainable because a healthy rate of weight loss is generally considered to be 1-2 pounds per week and losing 4kg pounds in 3 months fits within that range.

#### **REALISTIC/RELEVANT**

Losing **4kg** in 3 months is a realistic and reasonable goal when combined with a balance diet and regular physical activities.

#### **TIME BOUNDED**

The three-month timeline provides a clear deadline for attaining the goal.

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

**ACTIVITY 10: LOCOMOTOR MOVEMENTS.** Please refer to your instructor's announcement to have access in complying this activity.

Resting heart Rate (RHR) \_\_\_\_\_

ACTIVITY	RPE
<b>A. CRAWL AND CREEP EXERCISES:</b>	
Spider crawl	
Forward crawl	
Bear crawl	
Lateral sideways creeping	
<b>B. LINEAR MOVEMENTS</b>	
Hop	
Skip	
Jog	
Run	
<b>C. LATERAL MOVEMENTS</b>	
Slide	
Crossover	
Grapevine	
<b>D. OVERALL RPE</b>	
<p><b>FEEDBACK/EVALUATION:</b> In 2-3 sentences, kindly describe/justify your <b>OVERALL RPE</b> in terms of how you felt when you were doing the specific activities.</p>	



<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

**ACTIVITY 11: NON-LOCOMOTOR MOVEMENTS.** Please refer to your instructor's announcement to have access in complying this activity.

Resting heart Rate (RHR) \_\_\_\_\_

ACTIVITY	RPE
<b>A. ABDOMINAL BRACING EXERCISES</b>	
Superman	
Heel slide	
<b>B. DEAD BUG SERIES</b>	
DB 1	
DB 2	
DB 3	
<b>C. BIRD DOG SERIES</b>	
BD from push-ups	
Weighted BD	
<b>D. PLANK SERIES</b>	
Elbow/low plank w/ hip twist	
Side elbow	
Elbow/low plank to dolphin	
Elbow/low	
Side arm	
Arm/high	
<b>E. SQUAT SERIES</b>	
Spiderman lunge and squat	
Plie squat	
Narrow squat hold	
Sumo squat	
Squat with reach	
<b>F. OVERALL RPE</b>	
<b>FEEDBACK/EVALUATION:</b> In 2-3 sentences, kindly describe/justify your <b>OVERALL RPE</b> in terms of how you felt when you were doing the specific activities.	

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

**ACTIVITY 12: UPPER BODY PULL AND PUSH.** Please refer to your instructor's announcement to have access in complying this activity.

Resting heart Rate (RHR) \_\_\_\_\_

	SET 1	SET 2	SET 3
Inclined push-up			
Lying pull downs			
Cobras			
Snow angel			
Sumo squat to reach			
<b>OVERALL RPE</b>			
<b>FEEDBACK/EVALUATION:</b> In 2-3 sentences, kindly describe/justify your <b>OVERALL RPE</b> in terms of how you felt when you were doing the specific activities.			

Please do not forget:

1. Hydrate yourself after completing the activities.
2. Perform your cool down stretching exercises after performing the above mentioned activities.

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

**ACTIVITY 13: LOWER BODY (squats, lunge, hinge).** Please refer to your instructor's announcement to have access in complying this activity.

Resting heart Rate (RHR) \_\_\_\_\_

	SET 1	SET 2
Forward lunge		
Backward lunge		
Side lunges		
Squat taps		
Squat Cross Crunch		
Wide and Narrow squat		
Squat toe touch		
Hip lunge		
Glute bridge		
<b>OVERALL RPE</b>		
<b>FEEDBACK/EVALUATION:</b> In 2-3 sentences, kindly describe/justify your <b>OVERALL RPE</b> in terms of how you felt when you were doing the specific activities.		

Please do not forget:

1. Hydrate yourself after completing the activities.
2. Perform your cool down stretching exercises after performing the above mentioned activities.

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

**ACTIVITY 14: ABDOMINAL CRUNCHES.** Please refer to your instructor's announcement to have access in complying this activity.

Resting heart Rate (RHR) \_\_\_\_\_

	SET 1	SET 2
<b>A. STANDING</b>		
Oblique/side crunch		
Knee Drive		
Oblique Twist		
Pike Kick		
Wood Chop - right		
Wood Chop - left		
<b>B. LYING</b>		
Russian twist		
Leg raise		
Sit-ups		
Table tap crunch and reach		
Bicycle crunch		
<b>OVERALL RPE</b>		
<b>FEEDBACK/EVALUATION:</b> In 2-3 sentences, kindly describe/justify your <b>OVERALL RPE</b> in terms of how you felt when you were doing the specific activities.		

Please do not forget:

1. Hydrate yourself after completing the activities.
2. Perform your cool down stretching exercises after performing the above mentioned activities.

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

**ACTIVITY 15: WITH USE OF RESISTANCE BANDS.** Please refer to your instructor's announcement to have access in complying this activity.

Resting heart Rate (RHR) \_\_\_\_\_

	SET 1	SET 2
Single arm row		
Bicep curls		
Horizontal arm extensions		
Vertical arm extensions		
Rear arm extensions		
Banded squats		
Standing kickbacks		
Glute bridge with abduction		
Side lying leg raise		
Forward Lunge		
<b>OVERALL RPE</b>		
<b>FEEDBACK/EVALUATION:</b> In 2-3 sentences, kindly describe/justify your <b>OVERALL RPE</b> in terms of how you felt when you were doing the specific activities.		

Please do not forget:

1. Hydrate yourself after completing the activities.
2. Perform your cool down stretching exercises after performing the above mentioned activities.

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

**ACTIVITY 16: WITH USE OF DUMBBELLS.** Please refer to your instructor's announcement to have access in complying this activity.

Resting heart Rate (RHR) \_\_\_\_\_

	SET 1	SET 2
squat and bicep hammer curl		
rear lunges and arms overhead		
arm swing		
wall sit and arm lift		
lying leg crunches and arm press		
side lunges and side arm raise		
weighted punches		
squats and alternate arm raise with body twist		
weighted lying crunches		
super set arm fly and pull		
<b>OVERALL RPE</b>		
<b>FEEDBACK/EVALUATION:</b> In 2-3 sentences, kindly describe/justify your <b>OVERALL RPE</b> in terms of how you felt when you were doing the specific activities.		

Please do not forget:

1. Hydrate yourself after completing the activities.
2. Perform your cool down stretching exercises after performing the above mentioned activities.

<b>Name:</b>		<b>PE Section:</b>	
<b>Gender:</b>		<b>PE Schedule:</b>	
<b>Age:</b>	<b>Date:</b>	<b>Group #:</b>	<b>Class #:</b>

## ACTIVITY 17: PHYSICAL FITNESS TEST (POST TEST)

A. Perform the same HRFC fitness test you did during the Pretest for your Posttest. Check if there are changes or improvement in the results and classification.

HRFC	NAME OF TEST	RESULTS		CLASSIFICATIONS	
		PRETEST	POST TEST	PRETEST	POST TEST
Body Composition	BMI (if weighing scale is available) OR WHR (if tape measure is available)				
Cardiorespiratory Endurance	3-minute Step Test				
Muscular Strength and Endurance	Crunch Test				
Muscular Endurance – <b>for males only</b>	90 Degree - Push ups				
Muscular Endurance – <b>for females only</b>	Modified Push - ups				
Flexibility	Sit and Reach Wall Test  a. Palms b. Knuckles c. Fingertips d. None				

Show your BMI computation here:

BMI Formula: **weight in kg/height in m<sup>2</sup>**

**Example:** if body weight is 55 kg and height is 1.6 m, the BMI is 21.5 (normal weight)

Height in meters: \_\_\_\_\_

Weight in kg.: \_\_\_\_\_

