

**BY ORDER OF THE
SECRETARY OF THE AIR FORCE**

AIR FORCE MANUAL 36-2905

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Personnel

**AIR FORCE PHYSICAL FITNESS
PROGRAM**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This manual implements physical fitness requirements of Department of Defense Instruction (DoDI) 1308.3, *DoD Physical Fitness and Body Fat Procedures* and Air Force Policy Directive (AFPD) 36-29, *Military Standards*. This publication provides directive guidance for the physical fitness program. This instruction requires the collection and or maintenance of information protected by the Privacy Act of 1974 authorized by 10 USC § 9013, *Secretary of the Air Force*. The applicable System of Records Number F036 AF PC C, *Military Personnel Record System*, is available at <http://dpcl.d.defense.gov/Privacy/SORNs.aspx>.

This instruction has been developed in collaboration with the Chief of Air Force Reserve, (AF/RE), the Director of the Air National Guard, (NGB/CF), and the Deputy Chief of Staff for Manpower, Personnel and Services (AF/A1). This publication applies to the Regular Air Force, the Air Force Reserve and the Air National Guard. This policy applies to U.S. Space Force members until such time as separate service guidance is published.

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This publication may be supplemented at any level, but all supplements that directly implement this publication must be routed to the Office of Primary Responsibility for coordination, and all Major Command (MAJCOM)-level supplements must be approved by the Human Resource Management Strategic Board (HSB) prior to certification and approval.

The authorities to waive wing/unit level requirements in this publication are identified with a Tier (“T-0, T-1, T-2, T-3”) number following the compliance statement. See Department of the Air Force (DAF) Instruction (DAFI) 33-360, *Publications and Forms Management*, for a description of the authorities associated with the Tier numbers. Submit requests for waivers through the chain of command to the appropriate Tier waiver approval authority, or alternately, to AFPC/DP3SA for non-tiered compliance items.

SUMMARY OF CHANGES

This manual has been significantly revised. Incorporated changes include but are not limited to the expansion of roles and responsibilities, the inclusion of diagnostic fitness assessments, simplified track certification and recertification, creations of Air Force Physical Fitness Advisory Working Group and 5-step process for establishing Tier 2 physical fitness assessment and standards for physically demanding career-fields.

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Chapter 1

GENERAL INFORMATION

1.1. Overview. The goal of the Physical Fitness Program (PFP) is to motivate all Airmen to participate in a year-round physical conditioning program that emphasizes total fitness, to include proper aerobic conditioning, muscular fitness training, and healthy eating. An active lifestyle increases productivity, optimizes health, and decreases absenteeism while maintaining a higher level of readiness. It has been developed in collaboration with the Chief of Air Force Reserve (AF/RE), the Director of the Air National Guard (ANG/CF), and the Deputy Chief of Staff for Manpower, Personnel, and Services (AF/A1), and applies to all uniformed members of the Regular Air Force (RegAF) and Air Force Reserve Component.

1.1.1. Commanders should incorporate physical fitness into the Air Force culture establishing an environment for Airmen to maintain physical fitness and health to meet expeditionary mission requirements. The program promotes the primary physical fitness components of cardiorespiratory endurance (aerobic), body composition, muscular strength, muscular endurance, and flexibility of each Airman in the unit. The physical fitness assessment (PFA) provides commanders with a tool to assist in the determination of overall fitness of their military personnel.

1.1.2. It is every Airman's responsibility to maintain the standards set forth in this manual 365-days a year. Every uniformed Airman should be physically fit, regardless of age, grade, gender, or duty assignment. Physical fitness directly and positively impacts health, general fitness, duty performance and mission readiness.

1.1.3. Refer to AFI 48-103, *Health Promotion*, for additional guidance on how to lead a healthy life, improve your health, performance, readiness and productivity.

Chapter 2

ROLES AND RESPONSIBILITIES

2.1. Chief of Staff of the Air Force. Directs implementation of the PFP and renders final decision on all policy proposals pertaining to this manual.

2.2. Assistant Secretary of the Air Force for Manpower and Reserve Affairs (SAF/MR).

2.2.1. Provides policy oversight and advocacy of the physical fitness and body fat programs and the health awareness program as it relates to physical fitness.

2.2.2. Reviews and coordinates on all fitness-related policy proposals.

2.2.3. Deputy Assistant Secretary of the Air Force for Force Management Integration (SAF/MRM). Oversees the PFP and ensures it's compliance with existing legislation and policies.

2.2.4. Deputy Assistant Secretary for Reserve Affairs and Airman Readiness (SAF/MRR). Oversees the health awareness and body fat programs and ensures their compliance with existing legislation and policies.

2.3. Air Force Deputy Chief of Staff for Manpower, Personnel, and Services (AF/A1). Establishes, develops, coordinates and executes physical fitness policies and guidance through the Director of Military Force Management Policy (AF/A1P). **Note:** AF/A1 approves all new or altered PFAs.

2.3.1. Consults with SAF/MR and the Air Force Surgeon General (AF/SG) for medically-related fitness issues and body composition standards.

2.3.2. Directs research and studies to assess physical fitness methods and standards.

2.3.3. Director of Military Force Management Policy (AF/A1P). Develops and maintains guidance regarding implementation and administration of the PFP.

2.3.3.1. Coordinates on all Tier 1 waiver requests.

2.3.3.2. Coordinates with internal and external organizations as required.

2.3.3.3. Oversees the Air Force Physical Fitness Working Group.

2.3.4. Director of Air Force Services (AF/A1S). Advocates for availability of base-level fitness resources, such as facilities and equipment.

2.3.5. Director of Plans and Integration (AF/A1X). Provides software development and administration for the PFP, through the A1 Digital Transmission Activity.

2.3.6. Air Force Personnel Center (AFPC). Serves as the execution authority for this publication; implements and disseminates guidance and procedures.

2.3.6.1. Advises AF/A1P on the execution of physical fitness matters.

2.3.6.2. Collaborates with AF/A1P on process matters and changes that may impact the overall PFP and provides program metrics as required. Evaluates annual physical fitness reports and submits findings with a recommendation to AF/A1P.

2.3.6.3. Manages the Fitness Assessment Appeals Board process.

2.3.6.4. Provides physical fitness related advisories to the Air Force Board for the Correction of Military Records.

2.3.6.5. Collaborates with the A1 Digital Transformation Activity on software updates and issues pertaining to the PFP.

2.3.6.6. Renders decision on elevated user access to the physical fitness software.

2.3.6.7. Provides updates to AFPC Public Affairs (AFPC/PA) physical fitness webpage.

2.3.6.8. Special Programs (AFPC/DP3SA) processes and approves non-tiered items.

2.4. Air Force Deputy Chief of Staff for Operations, Plans and Requirements (AF/A3).

2.4.1. Ensures Special Warfare Airmen required to take the Tier 2 occupational fitness assessment adhere to the requirements in this manual.

2.4.2. Coordinates Tier 2 PFA guidance with AF/A1P.

2.5. Air Force Deputy Chief of Staff for Logistics, Engineering, and Force Protection (AF/A4).

2.5.1. Ensures Airmen in AFSCs required to take the Tier 2 occupational fitness assessment, adhere to the requirements in this manual.

2.5.2. Coordinates Tier 2 PFA guidance with AF/A1P.

2.6. Air Force Surgeon General (AF/SG).

2.6.1. Develops intervention training policy and guidance related to the medical aspects of the PFP.

2.6.2. Coordinates with AF/A1 on policies and programs that promote physical fitness.

2.7. Air Force Installation and Mission Support Center.

2.7.1. Ensures effective base support for the PFP, through the Air Force Services Center.

2.8. Air Force Services Center Fitness and Sports (AFSVC/SVORF).

2.8.1. Assists in developing training materials in consultation with the Air Force Physical Fitness Working Group as well as all health, fitness and exercise professionals.

2.8.2. Renders decision on user access requests to Air Force Fitness Management System II. Provides Air Staff, MAJCOM, and Fitness Information Manager User roles to authorized base personnel, except Air Reserve Component (ARC) personnel. (T-1).

2.8.3. Tracks and maintains DD Form 2875, *System Authorization Access Request*, written order, user agreement, and signed appointment letter for Fitness Information Managers, MAJCOM, and Air Staff User roles.

2.8.4. Updates and revises physical fitness AFFMS II User Guide as needed to correspond with this Air Force Manual.

2.8.5. Provides subject matter expertise with AFPC/DP3 to the Air Force Fitness Information Managers, Fitness Program Managers, and Fitness Assessment Cells on physical fitness guidelines outlined in this Air Force Manual.

2.8.6. Reviews unit Management Internal Control Toolset to ensure compliance over physical fitness policy outlined in this Air Force Manual.

2.9. Air Education and Training Command. Ensures Air Force training schools adhere to this manual.

2.10. National Guard Bureau Force Management (NGB/A1P).

2.10.1. Assigns authorized ANG personnel Fitness Information Manager user roles to physical fitness software.

2.10.2. Provides physical fitness related advisories to the Air Force Board for the Correction of Military Records affecting ANG members.

2.11. Installation or Base Commander/ANG Wing Commander.

2.11.1. Oversees the PFP and ensures compliance with this manual.

2.11.2. Provides an environment that supports and motivates a healthy lifestyle through optimal fitness and nutrition in accordance with AFI 48-103. **(T-2).**

2.11.3. Ensures subordinate commanders implement and maintain unit PFPs. **(T-2).**

2.11.4. Develop local plan for frequency of diagnostic PFAs or may delegate this authority to Unit commanders.

2.11.5. Oversees the appeals process of fitness assessments and provides the first coordination on appeals. **(T-2).**

2.11.6. Provides appropriate manpower, safe facilities, equipment, resources, and funding to support the Fitness Assessment Cell (FAC) and the PFP. **(T-2).**

2.11.7. Provides a location for administration of the fitness assessment components. **(T-2).**

2.11.8. Renders final decision on plans to appoint certified Physical Training Leaders (PTL) and Unit Fitness Program Managers (UFPM) to augment the FAC. **(T-2).**

2.11.9. Periodically reviews FAC operations to ensure augmented personnel are used in a manner that minimizes undue burden on units. **(T-2).**

2.11.10. Renders decision on 1.5-mile run or 2.0-kilometer walk assessment courses after collaboration with the local Civil Engineering Squadron (CES), Force Support Squadron (FSS), and Wing Safety; and files approval memorandum with the FAC. **(T-2).**

2.11.11. Implements certification and recertification of aerobic component tracks or courses. Certification and recertification must be in conjunction with local CES, FSS, and Wing Safety established procedures. **(T-2).**

2.11.12. Plans, programs, and budgets training to support the installation program, to include UFPM and PTL training and the Fitness Improvement Program (FIP) education and intervention program. **(T-2).**

2.11.13. The installation commander, ARC wing commander, or equivalent, will appoint a non-commissioned officer or senior non-commissioned officer of any Air Force specialty code to serve as the Fitness Information Manager. **(T-2).**

2.11.14. All wing commanders will establish local guidance for subordinate unit commanders regarding use of duty time for physical training during unit training assemblies, annual tours, and special tours. **(T-2).**

2.12. Force Support Squadron.

2.12.1. Oversees the function and management of the Fitness and Sport Center and the FAC. **(T-3).** Plans, programs, budgets, and funds for safe and effective fitness operations within the FAC. **(T-3).**

2.12.2. Ensures FAC staff and augmentees, and special population instructors (e.g., military training instructors, military training leaders, officer training school cadres) are fully trained and possess a PTL-Basic certification prior to conducting fitness assessments. **(T-2).**

2.12.3. Ensures adequate facilities and other resources are available to support fitness operations at home station and at deployed locations. **(T-2).**

2.12.4. Ensures the Fitness Center Manager and staff are trained and prepared to support the PFP at home station and at deployed locations. **(T-1).** **Exception:** Non-Appropriated Fund employees, contract civilians, and Appropriated Fund employees who only work the front desk, maintenance, and sports field operations.

2.12.5. Ensures Fitness Center staff are trained (as required) to support the program, e.g., training courses in accordance with AF Fitness Standards, developing and leading group exercise, leading FIP classes (refer to AFI 34-266, *Fitness, Sports, and World Class Athletes Programs* for fitness staff training). **(T-1).**

2.12.6. Ensures unit and collocated ARC PTLs complete Fitness and Sport Center orientation to include group physical training class setup, equipment use, and safety procedures. **(T-2).**

2.12.7. Reports monthly assessment statistics to wing commander, unit commander or designee. **(T-2).** The report will include, but not be limited to:

2.12.7.1. Fitness Assessment currency status by unit (e.g., number of percent current, not current, and exempt).

2.12.7.2. Fitness assessment categories by unit (e.g., number and percent excellent, satisfactory, unsatisfactory, and exempt).

2.12.8. Designates a person to conduct fitness assessment procedure training on the installation for PTL certification. **(T-2).**

2.13. Commands and Units. Commanders at all levels will establish an environment that supports, encourages, and motivates a healthy lifestyle through optimal physical fitness and nutrition and ensures compliance with this manual. **(T-1).** Commanders must ensure Airmen present professional dress and appearance standards while in uniform. **(T-3).**

2.13.1. Establish and enforce a unit PFP and ensure appropriate administrative action is taken in cases of non-compliance. **(T-2).**

2.13.2. Appoint individuals in writing to augment the FAC and administer unit physical training; and ensure appointment letters are filed with the FAC. **(T-2).**

2.13.3. Ensure Airmen enrolled in FIPs continue to meet program requirements, or document when they are not able to complete those requirements. **(T-2).**

2.13.4. Deployed Unit commanders will ensure PTLs conducting fitness assessments are PTL certified by the Expeditionary Force Support Squadron. Ensures PTLs forward the signed AF Form 4446, *Air Force Fitness Assessment Scorecard*, to Personnel Support for Contingency Operations, who in-turn will forward it to AF Manpower, Personnel and Services (AFFOR/A1) for update in Air Force Fitness Management System II (AFFMS II). **(T-2).**

2.13.5. Air Force wings will coordinate with the host Military Treatment Facility (MTF) to establish medical support for the PFP, to include space-available access to FIP, UFP, and PTL training. **(T-2)**

2.13.6. ARC Commander.

2.13.6.1. Promotes and supports unit PFPs as mission requirements and resources allow. **(T-3).**

2.13.6.2. Appoints the installation's Fitness Information Manager and FAC Manager. A noncommissioned officer or senior noncommissioned officer of any Air Force specialty code will be appointed by the installation commander, ARC wing commander, or equivalent, to serve as the FIM. **(T-2).**

2.14. Medical Group Commander.

2.14.1. Provides medical support for the installation PFP. **(T-3).**

2.14.2. Plans, programs, and budgets for medically-related intervention and training programs. **(T-3).**

2.14.3. Ensures MTF providers for Airmen receive initial and annual refresher training on the PFP, duty limiting conditions procedures, medical conditions, and medications that may affect fitness assessments. **(T-3).**

2.15. Chief, Aerospace Medicine or Equivalent.

2.15.1. Ensures AF Form 469, *Duty Limiting Condition Report*, related to fitness restrictions, fitness assessment restrictions are in compliance with AFI 10-203, *Duty Limiting Conditions*. **(T-2).** **Note:** At stand-alone ARC bases, the Exercise Physiologist will complete the AF Form 469. **(T-2).**

2.15.2. Provides medical oversight for medical reporting guidance for any injury sustained during fitness assessment and initiates appropriate Primary Care Manager referral, line-of-duty determination, and profiling actions as appropriate. **(T-3).**

2.15.3. Ensures high-risk AF Form 4446A, *Air Force Physical Fitness Screening Questionnaire (FSQ)* responses are reviewed and dispositioned by MTF medical providers consistent with current medical practice standards. **(T-3).**

2.16. Military Treatment Facility (MTF) Provider.

2.16.1. Stays up to date on program policy, FSQ guidance, and medical conditions affecting fitness assessments and Duty Limiting Condition procedures as it pertains to this policy. **(T-2).**

2.16.2. Makes a determination at any patient encounter in which the medical condition impacts fitness activity (to include assessment and training). Documents limitations and Fitness Assessment exemptions on AF Form 469 in accordance with AFI 10-203. (T-2).

2.16.3. Provides risk assessment and recommendations for Airmen with a high-risk response on the FSQ. (T-2).

2.16.4. Evaluates Airmen to determine whether a medical condition precludes the Airmen from obtaining a passing score on the fitness assessment. (T-2).

2.17. Air Force Physical Fitness Working Group. The Air Force Physical Fitness Advisory Working Group will provide Air Force leaders recommendations on matters related to the PFP. (T-1) The working group convenes as often as necessary, either in person or virtually, and report findings and/or recommendations to the AF/A1. (T-1).

2.18. Fitness Information Manager.

2.18.1. Provides AFSVC/SVORF with a DD Form 2875, *System Authorization Access Request*, written order, user agreement, and signed appointment letter to gain access to AFFMS II.

2.18.2. Updates AFFMS II with corrections resulting from: 1) administrative errors, and or 2) records approved through the appeal process.

2.19. Fitness Program Manager.

2.19.1. Oversees the installation PFP.

2.19.2. They serve as a consultant to commanders, providers, FAC, and individuals with administrative support. (T-2).

2.19.3. Provides training to PTLs and Fitness Program Medical Liaison Officers, this includes initial and refresher training. (T-2).

2.19.4. Conducts staff assistance visits on unit PFP at the request of commanders (or equivalent). (T-2).

2.19.5. Provides exercise assessment prescription and counseling in accordance with functional limitations provided on AF Form 469. (T-2).

2.19.6. Documents exercise recommendations on AF Form 422, *Notification of Air Force Member's Qualification Status* when an Airman is referred by their healthcare provider, UFPM, Commander, or self-referral. (T-2).

2.19.7. Participates in the Installation Deployment Availability Working Group. (T-2).

2.20. Air Force Reserve Command (AFRC) Fitness Program Coordinator. A senior noncommissioned officer, officer, or civilian equivalent appointed by the AFRC/CC or AFRC/CV. Reports adverse events related to fitness participation to AFRC/SG and AFRC/A1. (T-2).

2.20.1. Will assign UFPM roles in AFFMS II for AFRC. (T-2).

2.20.2. Ensures exercise, nutrition, and behavioral health education programs are incorporated into required program education and implements Air Force Medical Operations Agency Health Promotion Operations approved FIP. (T-2).

2.20.3. Ensures PTL trainer tracks certifications and only provides fitness assessment procedure training to those individuals who possess and present a current Cardio Pulmonary Resuscitation certification card. **(T-2)**.

2.20.4. Conducts Staff Assistance Visits on the unit program at the request of the commander (or equivalent). **(T-2)**.

2.21. Unit Fitness Program Manager (UFPM).

2.21.1. The UFPM is a unit Airman who is responsible to the commander for the unit PFP and who serves as the liaison between the unit commander, FAC, and the Fitness Program Manager. May augment the FAC to conduct official PFAs.

2.21.2. Will be PTL certified. **(T-2)**

2.21.3. In locations where a FAC does not exist (such as a geographically separated units) will fulfill the roles of the FAC in conducting PFAs and inputting scores in AFFMS II. **(T-2)**.

2.21.4. Maintain a minimum satisfactory score on their PFA. **(T-2)**. If, at any time, their score drops below 75.0, the UFPM will be removed as a certified PTL. **(T-2)**. Once they achieve a passing score and re-accomplish necessary training, PTL certification can be reinstated. **Note:** This requirement does not apply to civilian appointed program managers.

2.21.5. Provides Airmen with a FSQ to complete prior to scheduling any official PFA or unofficial diagnostic PFA. **(T-2)**. Reviews completed FSQ prior to scheduling any Airman to conduct an official PFA.

2.21.6. Refers Airmen with high-risk responses on the FSQ to an appropriate provider for assistance. **(T-2)**. Retains a current copy of the FSQ for each Airman receiving an unsatisfactory assessment or “did not finish”. **(T-2)**. **Note:** Retain the Fitness Screen Questionnaire until the Airman achieves a passing score or for 24 months, whichever is earlier.

2.21.7. Schedules Airmen for PFAs. Communicates with the FAC when an Airman returns from deployment.

2.21.8. Must initiate AF Form 108, *Physical Fitness Education and Intervention Processing* to include mandatory FIP option(s) and FIP appointment date, time and location.

2.21.9. Informs Airmen of Fitness Improvement Program (FIP) requirements and records counselling in AFFMS II. **(T-2)**. Notifies unit commander of Airmen failing to show for any FIP appointment. **(T-2)**.

2.21.10. Initiates and maintains PFP case files in a secured location. **(T-2)**. Ensure open and closed fitness case files are sealed and mailed to the gaining commanders of Airmen departing for permanent change of station (PCS), permanent change of assignment, or transferring units. **(T-2)**. The losing UFPM will retain a copy for 90 calendar days. **(T-2)**.

2.21.11. Tracks the number of diagnostic PFAs conducted in the unit.

2.21.12. Provides fitness metrics and unit status report to the unit commander and other leaders monthly. **(T-2)** The fitness metrics and unit status include the following:

2.21.12.1. PFA currency status, e.g., number of percent current, not current, and exempt. **(T-2)**.

2.21.12.2. PFA categories, e.g., number of percent excellent, satisfactory, unsatisfactory, and exempt, to include DAWG eligible exemptions. (T-2).

2.21.13. Maintains a case file on Airmen who do not complete their PFA due to non-current, unsatisfactory, two or more consecutive exemptions or exemptions in-between consecutive unsatisfactory PFAs. (T-2).

2.21.14. Ensures PTLs are informed on local PFA processes and procedures. (T-2).

2.21.15. Refers Airmen to the Fitness Program Manager for an exercise assessment, counseling, and/or reconditioning program. (T-2).

2.21.16. Maintains a case file on Airmen who do not complete their PFA. (T-2).

2.22. Air Force Reserve. The Wing Fitness Program Manager (Exercise Physiologist at AF Reserve Standalone Installations) will serve as the PFP contact for Air Force Reserve units. (T-2).

2.22.1. Provides overall guidance and recommendations on unit physical training program as requested by the unit commander. (T-2).

2.22.2. Ensures UFPMS and PTLs are trained and certified to lead unit physical training and conduct PFAs if not collocated with a base. (T-2). Secures training and certification at specified locations on base, or utilizes remote or online training options if space is unavailable. (T-2). Ensures all PTLs are trained for Basic Life Support (or equivalent training). (T-2).

2.22.3. Conducts staff assistance visits on unit fitness program at the request of the commander (or equivalent). (T-2).

2.22.4. Provides initial and refresher training for Air Force Reserve Fitness Program Medical Liaison Officer regarding program policies and procedures. (T-2).

2.22.5. Coordinates with Air Force Reserve Command Fitness Program Coordinator to report adverse events related to fitness participation. The report is provided to AFRC/SGPH and AFRC/A1. (T-2).

2.22.6. Assigns AFFMS II UFPM roles for members within the wing. (T-2).

2.23. AFR Exercise Physiologist (EP). Serves as the AFR Stand-alone Installation Fitness and Health Promotion Manager and is the SME for the Installation Fitness Program. The Fitness and Health Promotion Manager will design, implement, and report comprehensive physical fitness/sports medicine program, fitness and health assessment, education, and intervention program aimed at enhancing combat readiness of AF Reserve members, Individual Mobilized Augmentees (IMA's), active duty assigned and overall fitness/health promotion of dependents Department of Defense(DoD) civilians, and retirees of the installation.

2.24. Fitness Assessment Cell (FAC) Manager.

2.24.1. Oversees the operation of the installation FACs and ensures all procedures are in compliance with this manual. (T-2). Maintains PTL certification. (T-2). **Note:** The FAC is centralized under the FSS and augmented by installation PTLs and the UFPM. FAC conducts PFAs and inputs scores in AFFMS II. **Note:** May take the role of FIM.

2.24.2. A noncommissioned officer, senior noncommissioned officer, or field grade officer of any Air Force specialty code appointed in writing by Installation commander, ARC wing commander, or equivalent. **(T-2) Exception:** At stand-alone ARC bases, the Exercise Physiologist will perform the FIM duties. (T-2). **Note:** only two are allowed per installation.

2.24.3. Trains UFPMS on their responsibilities, fitness assessment procedures, AFFMS II, and unit metric reports. **(T-2).**

2.24.4. Can assign AFFMS II user roles and privileges to authorized personnel, and oversee UFPMS' use of the system upon receipt of a DD Form 2875, *System Authorization Access Request*, written order, user agreement, and appointment letter.

2.24.5. Provides PTL refresher training to all FAC augmentees as necessary and prior to administering fitness assessments. **(T-2).**

2.24.6. Provides testing dates and times for fitness assessments to the UFPM (or representative). **(T-2).**

2.24.7. Ensures all portions of the fitness assessment are administered in accordance with [Chapter 3](#). **(T-1).**

2.24.8. Ensures PFA scores are entered into AFFMS II within five (5) duty days. **(T-2).** **Note:** Score entry should be a priority over other duties

2.24.9. Notifies UFPMS of all fitness assessment failures. **(T-2).**

2.24.10. Conducts staff assistance visits on unit PFPs at the request of commanders (or equivalent). **(T-2).**

2.24.11. Files completed written orders for all FAC augmentees. **(T-2).**

2.24.12. Files copies of AF Form 4446, AF Form 469 (as applicable), and AF Form 4446A for all tests administered by FAC and retains copies for one year. **(T-2).** For unsatisfactory fitness assessments, maintains the original or electronic copy of the AF Form 4446, AF Form 4446A, and AF Form 469 (if applicable), until the Airman achieves a passing fitness assessment score or for 24 months, whichever is earlier. **(T-2).** Airmen in PCS status will hand-carry a copy of their official unsatisfactory score card to their next duty station and provide a copy to their UFPM upon in-processing. **(T-2).** **Note:** In cases where no FAC exists, the UFPM files and maintains either paper or electronic copy.

2.24.13. Provides Military Personnel Section Career Development Promotions Office with a by-name list of all fitness assessment failures and non-current Airmen assigned no later than the 15th of each month. **(T-2).**

2.24.14. At installations where the Fitness Center is operated by military and or appropriated fund civilian employees, the fitness center Manager assigns a noncommissioned officer or senior noncommissioned officer with 3F1X1 (Services) Air Force Specialty Code or a civilian employee already working at the Fitness and Sport Center to oversee FAC management (including UFPM and PTL augmentees). Contractors and non-appropriated fund employees, to include those funded through a Non-Appropriated Fund Instrumentality memorandum of agreement, will not perform this duty. **(T-1).**

2.24.15. At installations where the Fitness Center is operated under a Non-Appropriated Fund Instrumentality memorandum of agreement or contract and there are no 3F1X1 (Services) noncommissioned officers, Force Support Squadron Commander (FSS/CC), in conjunction with installation leadership, will identify an Airman (minimum rank of Staff Sergeant) from anywhere on the installation to perform FAC Manager duties. **(T-2)**. Airmen assigned as the FAC Manager will report to and elevates FAC issues and concerns to the Sustainment Services Flight Chief (FSS/FSV). **(T-2)**.

2.25. Fitness Assessment Cell (FAC) Augmentee. Airmen trained to oversee and administer fitness assessments. This is an additional duty and not associated with any Air Force specialty code. Can be a PTL or UFPM who is PTL certified.

2.25.1. Military UFPMs and unit PTLs selected to augment the FAC in the administration of fitness assessments are known as FAC augmentees. All military PTLs and UFPMs, may augment the FAC.

2.25.2. Completes refresher training on fitness assessment procedures at the beginning of their FAC rotation. **(T-2)**. The refresher training includes an overview of proper assessment procedures as well as local assessment instruction and has to be completed prior to conducting any fitness assessments as a FAC augmentee. **(T-2)**.

2.25.3. Provides completed written order at [Attachment 5](#) and a copy of the Cardio Pulmonary Resuscitation card to the FAC Manager prior to administering any fitness assessments as a FAC Augmentee. **(T-2)**. Administers all portions of the fitness assessment in accordance with [Chapter 3](#). **(T-2)**

2.25.4. Reviews FSQs completed the day of the assessment and notifies the UFPM of any Airman with high-risk responses on the FSQ for referral to a health care provider. **(T-2)**. If the Airman has a component exemption, they present a current AF Form 469 at the time of testing. **(T-2)**.

2.25.5. When conducting assessments, FAC augmentees will read the component instructions in [Attachment 3](#) to all Airmen and demonstrate the proper technique, or show the Air Force instructional video. **(T-2)**. If the instructional video is shown, reading the instructions and demonstration is not required.

2.25.6. FAC augmentees will perform abdominal circumference measurements for Airmen of the same gender. **(T-2)**. When a FAC augmentee of the same gender is not available, an observer of the same gender must be present. **(T-2)**.

2.25.7. Supervises Airmen conducting push-ups, sit-ups, and the 1.5 mile run/2.0 kilometer walk at a ratio of no more than 12 Airmen for every one FAC augmentee. When multiple Airmen are testing, they will pair off and count for each other while the FAC augmentee provides oversight to ensure proper form and repetition count. **(T-2)**. **Note:** ARC may deviate from 12:1 ratio when weekend testing requires a ratio greater than 12:1, but will not exceed a ratio greater than 24:1. ARC Airmen must be in a qualified duty status (see [Attachment 1](#), Terms for definition of qualified duty status) while the fitness assessment is being administered. **(T-0)**. ARC UFPM or PTL may administer the test in any status.

2.25.8. Documents and signs fitness assessment results on a hard copy AF Form 4446, and obtains Airman's signature after ensuring it is completed correctly. **(T-2)**. Provides a copy of the signed score sheet to the Airman for their personal records. **(T-2)**. **Note:** Use of the AF Form 4446 is mandatory. Locally-produced scorecards cannot be used.

2.25.9. At locations not collocated at a major AF installation (e.g., Geographically Separated Units, Detachments), UFPMs and PTLs will fulfill the roles of the FAC. **(T-2)**. Fitness assessments will be conducted by a certified PTL will conduct fitness assessments and ensure all portions of the assessment are administered in accordance with **Chapter 3**. **(T-2)**.

2.26. Physical Training Leaders (PTL).

2.26.1. PTLs are Airmen trained to lead unit physical training exercises and administer fitness assessments. Will maintain a fitness assessment score of 75.0 or higher. **(T-2)**. If, at any time, a PTL's fitness assessment score drops below 75.0 or becomes noncurrent, the certification will be voided. **(T-2)**. For commanders to reinstate a PTL, they must achieve a passing score and re-accomplish necessary training, certification can be reinstated. **(T-2)**. **Note:** Civilians are not required to take a PFA.

2.26.2. PTLs will be trained for Basic Life Support (or equivalent training). **(T-2)**.

2.26.3. Will attend annual and refresher training on Basic Life Support and fitness assessment procedures. **(T-2)**. Completes all refresher training annually for the duration of appointment as a PTL. **(T-2)**. **Note:** Basic Life Support certification is valid for two years, however Airmen must provide a valid certificate at the time of the refresher. **(T-2)**.

2.26.3.1. May be appointed as a FAC augmentee. They augment the FAC to assist with installation fitness assessment administration and AFFMS II score updates.

2.26.3.2. To become a certified PTL, an individual must complete the following: Basic Life Support training (or equivalent training), fitness assessment procedures training, and online PTL training course located on the Advanced Distributed Learning Service (Airmen continue completing former PTL-Basic and Advanced training until new training is developed). **(T-2)**. Airman cannot administer fitness assessments or lead unit fitness training until all training requirements have been completed.

2.26.3.3. ARC PTLs at collocated bases will receive initial and refresher training from the regular Air Force (RegAF) Fitness Program Manager, and will be trained to complete official fitness assessments. **(T-2)**. ARC PTL will supplement the host FAC to support ARC official fitness assessments. **(T-2)**.

2.26.3.4. All PTLs must documents fitness assessment results on a hard copy AF Form 4446, signs scorecard, and obtains Airman's signature on the scorecard, acknowledging completion of fitness components. **(T-2)**. PTL will provide a copy of the signed scorecard to the FAC (or UFPM where no FAC exists) for AFFMS II entry and to the Airman for their personal records. **(T-2)**.

2.26.3.5. PTL wears the uniform of the day or physical training gear when administering official and unofficial fitness assessments. **(T-3)**. Local leadership will establish which uniform (uniform of the day or physical training gear) must be worn in the performance of this duty. **(T-3)**.

2.27. Medical Liaison Officer. The ARC medical unit commander responsible for health service support to the wing or group shall appoint a credentialed provider as medical liaison officer to serve as the program's consultant to all other medical providers and support staff.

2.27.1. For ARC Airmen, the medical liaison officer is the individual's military health care provider. For ANG, the medical liaison officer is normally located at the Guard Medical Unit.

2.27.2. Ensures all medical providers receive adequate training on the PFP procedures. **(T-2)**. Training should include program policies, medical conditions, and medications affecting assessments and duty limiting conditions procedures.

2.28. Airman.

2.28.1. Maintains individual year-round physical fitness through self-directed and unit-based PFPs, while maintaining proper nutrition standards. Airmen must know the block of time within which their assessment is required in order to remain current in accordance with **Chapter 3. (T-2)**

2.28.2. Notifies the UFPM, designated FAC representative, or chain of command, in writing (includes e-mail) of the need to schedule the assessment. Requests that it be scheduled immediately for accomplishment within the required window, if not scheduled in a period required to remain current.

2.28.3. Remains current as defined in **Chapter 3. Note:** it is the commander's discretion to annotate a non-current or failing assessment within the reporting period on the evaluation.

2.28.4. Monitors any personal fitness assessment exemptions, scheduling all necessary medical appointments, and initiating fitness assessment test arrangements in a timely manner.

2.28.5. Airman should seek medical evaluation or intervention if a medical condition is believed to impact the ability to complete the fitness assessment.

2.28.6. Completes FSQ in accordance with **Chapter 3. (T-2)**. If arriving without a FSQ, the FAC staff or augmentee will ensure the Airman completes a FSQ for review before the assessment is administered. **(T-2)**. **Note:** Failure to complete FSQ does not invalidate the assessment and the FAC will document any cases where FSQ is not completed and attach to assessment. **(T-2)**

2.28.6.1. Upon completion of the FSQ, provide a copy to the UFPM and FAC member prior to the assessment.

2.28.6.2. If an Airman has a medical condition or identifies a medical condition on the FSQ that would limit the member from completing all components of the assessment and the member does not have a current AF Form 469 documenting assessment exemptions, the Airman must notify their UFPM and schedule an appointment with their MTF (ANG Medical Liaison Officer (MLO)). **(T-2)**. A new appointment must be scheduled within five duty days (30 calendar days for Title 32 Drill Status Guardsman) of the original assessment date. **(T-2)**. **Note:** If no appointments are available within this timeframe, Airman must be scheduled for first available appointment and notify their UFPM.

2.28.6.3. Notifies UFPM upon receiving an AF Form 469 from healthcare provider with fitness restrictions and or fitness assessment exemptions in accordance with AFI 10-203. Then provides a copy of AF Form 469 to FAC staff, augmentee, or PTL prior to taking assessment.

2.28.6.4. Submits any updates via FSQ, prior to completing an assessment. If health condition changes at any time prior to assessment seek medical attention.

2.28.7. If entered into intervention program(s), Airman must complete all program requirements and if appropriate, provides documentation of compliance in accordance with [Chapter 6](#). (T-2).

2.28.8. May access individual fitness reports directly from the AFPC Secure website.

2.28.9. Will acknowledge assessment component results by signing a hard copy AF Form 4446 following completion of the assessment. (T-2). Refusal to sign the scorecard does not invalidate the assessment results.

2.28.10. Will wear the Air Force physical training gear to complete all components of the assessment in accordance with AFI 36-2903, *Dress and Personal Appearance of Air Force Personnel*. (T-2).

2.28.11. ARC Airmen will ensure they are in a qualified duty status for assessments. (T-0). Assessments can be performed in the following statuses: active duty status: Annual Tour, Initial Active Duty Training, Proficiency Training, Reserve Personnel Appropriation, Military Personnel Appropriation, Reserve Management Period , and School Tour; inactive duty status: Inactive Duty Training and Unit Training Assemblies.

2.28.12. No other duty status, i.e., Equivalent Reserve Instruction, Equivalent Training, Additional Training Period, Additional Flying Training Period, Ground Training Period, is an appropriate status to be used for the performance of the assessment requirement.

2.28.13. For safety, Airmen must understand and comply with the guidelines contained in AFI 44-102, *Medical Care Management* regarding the use of weight control drugs and surgery. (T-1).

Chapter 3

OFFICIAL FITNESS ASSESSMENT

3.1. General. The Air Force tests aerobic fitness, body composition, and muscular fitness components to determine overall fitness. Airmen must achieve a minimum score in each component as well as an overall composite score of 75 to remain current. Component scores, addressed in [Attachment 2](#), are based on age and gender. **Note:** Airmen are subject to the component scores based on their gender reflected in the Military Personnel Data System. **(T-1).**

3.1.1. The components of the Tier 1 physical fitness assessment (PFA) are: body composition (evaluated by abdominal circumference measurements), aerobic (evaluated by a 1.5 mile run or 2.0 kilometer walk if not cleared for the run), and muscular fitness (evaluated by number of push-ups and sit-ups).

3.1.2. The components of the Tier 2 PFA are established using an approved 5-step process located at [Attachment 10](#). Functional authorities are responsible for drafting and coordinating any Air Force Manual pertaining to the Air Force PFA.

3.1.3. Refer to AFPC website (<https://www.afpc.af.mil/Career-Management/Fitness-Program/BAFA/>) for other Tier 2 physical fitness guidance and updates.

3.2. Official Physical Fitness Assessment (PFA) Requirements. The FAC, PTLs and UFPMs will conduct the PFA for all Airmen (except for basic military and technical training students in accordance with [Chapter 6](#)) and may support fitness assessments for ARC tenant units at RegAF installations to include Unit Training Assembly weekends, as requested or provided for in their host-tenant agreements. **(T-1).** Installations will develop a local plan, signed by the Wing Commander or equivalent, for Unit commanders to appoint PTLs and UFPMs to augment the FAC for the purpose of administering fitness assessments. **(T-3).** PTLs will conduct PFA and the designated FAC Manager will provide oversight. **(T-2).** Fitness assessment scores will only be updated by FAC or designated UFPMs when a FAC does not exist. **(T-2).** Non-appropriated funded Fitness Center staff will not be used to augment the FAC to conduct fitness assessments. **(T-0).**

3.2.1. Airmen must take the PFA at their approved home station location unless written approval from unit commander (or supervisor for IMAs) has been given to test at another approved assessment location. **(T-2).** The FAC at approved assessment locations is responsible for updating the final score into AFFMS II and sending a copy of the AF 4446 to the Airman's home station for record keeping. **(T-3).**

3.2.2. Officials, e.g., WFPM, FAC manager, AFR stand-alone EPs, in charge of training PTLs on PFA administration, must use official testing procedures per this AFMAN and must not deviate from these official PFA procedures. **(T-1).**

3.2.3. All Airmen must complete the FSQ and provide it to their UFPM for review prior to PFA. **(T-1).** Airmen will bring completed FSQ to their PFA. **(T-3).** The FAC will not test members without required FSQ documentation. **(T-1).**

3.2.3.1. All Airmen must complete the FSQ and provide it to their UFPM for review NLT 7 calendar days prior to their scheduled fitness assessment **(T-1).** **Note:** Refer to [paragraph 2.25](#).

3.2.3.2. A medical provider must evaluate all Airmen with risk factors identified on the FSQ prior to the fitness assessment. **(T-1)**. If any item on the FSQ indicates a condition which might limit performance of any component of the fitness assessment, and there is not an accompanying current AF Form 469, the UFPD will refer them to the MTF, Reserve Medical Unit or ANG Medical Liaison Officer. **(T-2)**. The Airman must carry the FSQ to the medical evaluation. **(T-1)**. The provider or ARC Medical Liaison Officer will complete and sign the appropriate place on the FSQ, and complete an AF Form 469, if applicable, and the Airman will return the FSQ to the UFPD. **(T-1)**. The Airman must bring their completed and signed AF Form 469 (working copies not permitted) to the next scheduled PFA. **(T-3)**

3.2.4. Airmen will complete part I of the AF Form 4446, *Air Force Physical Fitness Assessment Scorecard*, prior to beginning the assessment and indicate whether the assessment is diagnostic or official. **(T-3)**.

3.2.5. Airmen will wear official Air Force physical training gear. **(T-2)**.

3.2.6. Airmen will complete all four components, unless medically exempt on a current AF Form 469. **(T-1)**.

3.2.7. Official PFA test component order: body composition component must precede aerobic and muscular fitness components. **(T-3)**.

3.2.8. All PFA components must be completed within a 3 hour window from initial measurement until final component completion on the same day. **(T-1)**.

3.2.9. A minimum three minute rest period is required between components. **(T-2)**.

3.2.10. The aerobic component, *i.e.*, 1.5-mile run or 2-km walk, must be accomplished on a certified track or course. **(T-2)**

3.2.11. A certified and officially appointed physical training leader (PTL) will conduct official PFAs with an automated external defibrillator (AED) present. **(T-2)**.

3.3. Official Physical Fitness Assessment Requirements.

3.3.1. If FAC staff determine extenuating circumstances prevent completion of the test, e.g., rapidly changing or severe weather conditions, emergencies, injury during fitness assessment, or travel time needed to complete other components at alternate locations, then all components must be rescheduled and completed at the earliest opportunity. **(T-2)**. ARC Airmen will be required to retest no later than the next Unit Training Assembly and when official fitness assessment are being conducted. **(T-2)**.

3.3.2. Airmen have one opportunity to complete each of the PFA components per fitness assessment. **(T-1)**. If an Airman refuses to complete their PFA due to failing to meet the minimum in one or multiple components, their incomplete PFA will be recorded as an official PFA. **(T-1)**. Scores for all components are final when annotated and signed on AF Form 4446. **(T-1)**.

3.3.3. ARC Airmen must be in a qualified duty status for assessments. **(T-0)**.

3.3.4. A medical provider must evaluate all Airmen with risk factors identified on the FSQ prior to the fitness assessment. **(T-1)**. If any item on the FSQ indicates a condition which might limit performance of any component of the fitness assessment, and there is not an accompanying current AF Form 469, the UFPD will refer them to the MTF, Reserve Medical Unit or ANG Medical Liaison Officer. **(T-2)**. The Airman must carry the FSQ to the medical evaluation. **(T-1)**. The provider or ARC Medical Liaison Officer will complete and sign the appropriate place on the FSQ, and complete an AF Form 469, if applicable, and the Airman will return the FSQ to the UFPD. **(T-1)**. The Airman must bring their completed and signed AF Form 469 (working copies not permitted) to the next scheduled PFA.

3.4. Assessment Procedures. All components of the fitness assessment must be completed within a three-hour window on the same day. **(T-1)**. If FAC staff or augmentees determine extenuating circumstances prevent completion of the test (e.g., rapidly changing or severe weather conditions, emergencies, injury during fitness assessment, or travel time needed to complete other components at alternate locations) then all components must be rescheduled and completed at the earliest opportunity, but within five duty days. **(T-2)** ARC Airmen must be in a qualified duty status for assessments. **(T-0)**. ARC Airmen will be required to retest no later than the next Unit Training Assembly and official fitness assessment are being conducted. **(T-2)**. **Note:** Videotaping of fitness assessments is not allowed, nor should it be used in the appeal process.

3.4.1. Airmen will have one opportunity to complete each of the fitness assessment components per fitness assessment. **(T-1)**. If an Airman refuses to complete their fitness assessment due to failing to meet the minimum in one or multiple components, their incomplete fitness assessment will still count and be updated in AFFMS II. **(T-1)**. Scores for all components are final when entered into AFFMS II. **(T-1)**.

3.4.2. Airman will receive a minimum three minute rest period between components. **(T-2)**.

3.4.3. Airmen must take the fitness assessment at their approved home station location unless written approval by the unit commander has been given to test at another approved assessment location. **(T-2)**.

3.5. Body Stature (Height) and Body Mass (Weight). Height and weight measurements will be obtained per DoD guidance (DoDI 1308.3). **(T-0)**. Airman must be accomplished immediately prior to FA. **(T-3)** These measurements are not factored into the PFA composite score. The measurements will be logged on the AF Form 4446 and entered into AFFMS II.

3.5.1. Height will be measured in the FAC in conjunction with weight and abdominal circumference measurements. **(T-1)**. Where a FAC does not exist, unit commanders may designate a location for body composition measurements.

3.5.1.1. Height will be measured on a calibrated stadiometer (see [Attachment 1](#)) or wall mounted measuring device. **(T-2)**.

3.5.1.2. Airmen will stand on a flat surface with the head held horizontal looking directly forward, and the chin parallel with the floor. **(T-2)**. The body should be straight, but not rigid, similar to the body position when at attention.

3.5.1.3. Airman's height measurement will be recorded to the nearest inch. **(T-1)**. Height fractions less than ½ inch are rounded down to the nearest inch. If it's greater than ½ inch round up to the nearest inch.

3.5.2. Airman's weight will be measured on a scale calibrated in accordance with Section 3 of Technical Order 33K-1-100-1, *Calibration Procedure for Maintenance Data Collection Codes and Calibration Measurement Summaries*, and recorded to the nearest pound with the following guidance. **(T-1)**.

3.5.2.1. Weight fractions less than ½ pound, are rounded down to the nearest pound. Weight fractions greater than ½ pound, are rounded up.

3.5.2.2. Two pounds are subtracted for clothing worn during official fitness assessment.

3.5.3. Abdominal Circumference Assessment. Abdominal circumference measurement is used to obtain the body composition component score. **(Note:** Airmen testing on abdominal circumference only are required to meet the minimum component measurement to pass the fitness assessment.)

3.5.3.1. FAC staff or PTL will measure the abdominal circumference measurement in a private room or in a partitioned area. **(T-2)**. Individuals conducting abdominal circumference measurements should be of the same gender as the Airman being taped. **(T-2)**. Where FAC staff or a PTL of the same gender is not available, an observer of the same gender must be present. **(T-2)**.

3.5.3.2. The test administrator will use measures made of non-stretch fiberglass material for the abdominal circumference measurement. **(T-2)**. Measurement will be taken on bare skin. **(T-1)**.

3.5.3.3. The test administrator will start the measurement on the right side of the Airman. **(T-1)**. The test administrator will locate the measurement landmark immediately above the right uppermost hip bone (superior border of the iliac crest) at the side of the body vertically in line with the right armpit (mid-axillary line). **(T-1)**. If desired, the Airman may assist the test administrator in locating the measurement landmark by resting the right hand on the hip, using rearward facing right thumb to locate the iliac crest. The test administrator will determine final horizontal-vertical intersection point for landmark confirmation. **(T-1)**.

3.5.3.4. The Airman will stand on a flat surface with feet no more than shoulder width apart. **(T-2)**. The head should be horizontal, looking directly forward with the chin parallel to the floor. The Airman may use one hand to initially assist the test administrator in anchoring the tape measure to the body, but must remove the hand from the tape measure before the official measurement is recorded. **(T-1)**. The free hand may be used to hold the shirt out of the way, but no part of the hands or arms may extend above the shoulders.

3.5.3.5. The Airman will remain motionless while the test administrator conducts the measurement. The test administrator will move around the Airman placing the tape in a horizontal plane around the abdomen. **(T-1)**. The test administrator will ensure tape is parallel to the floor at the level of the landmark (bottom edge of the tape just contacts

landmark), is snug, but does not compress the bare skin. (T-1). The test administrator will take the measurement at the end of the Airman's normal respiration. (T-2).

3.5.3.6. The test administrator will take the circumference measurement three times and record each measurement rounding down to the nearest ½ inch. (T-1). If any of the measurements differ by more than one inch from the other two, the test administrator will take an additional measurement. (T-1). The test administrator will compute the average of the three closest measurements by dividing the sum by three down to the nearest ½ inch. (T-1). The test administrator will record this value as the abdominal circumference measurement. (T-1).

3.6. Aerobic Fitness Assessment. Airmen will perform the run or walk on an approved distance course. (T-1). When the run is performed at elevation levels of 5,250 feet or higher, refer to the altitude adjustment chart at [Attachment 4](#).

3.6.1. Aerobic fitness is measured with a 1.5-mile run (unless medically exempted). Test administrator will read verbal instructions at [A3.5](#) to those performing 1.5 mile. (T-2)

3.6.2. Airmen medically exempted from the run and cleared for the alternate aerobic assessment will, upon recommendation by the clinical provider or Medical Liaison Officer, complete the 2.0-kilometer walk. (T-1). Airmen performing the 2.0-kilometer walk are not allowed to run (i.e., at least one foot must be in contact with the ground at all times) or the assessment will be terminated. Test administrator will read verbal instructions to those performing 2.0 kilometer walk at [A3.6](#). (T-2)

3.6.3. The 2.0-kilometer walk is the only authorized alternate aerobic assessment. **Note:** Airmen do not select the aerobic assessment method. The clinical provider or Medical Liaison Officer determines which assessment to use based on the Airman's assessment history and medical recommendation as documented on the AF Form 469.

3.7. Muscular Fitness Assessment. Muscular fitness is measured with a one minute timed push-up component and a one minute timed sit-up component. Assessment procedures and techniques are outlined in [Attachment 3](#). FAC augmentees or PTLs will demonstrate proper push-ups and sit-ups prior to administering the fitness assessment unless an instructional video is shown, if available. (T-2).

3.7.1. Push-Up Component and Sit-Up Component. The push-ups and sit-ups are used to assess the Airman's upper and lower body muscular fitness.

3.7.1.1. *Assessment Duration.* Airmen have one minute to complete as many correct push-ups and sit-ups as possible.

3.7.1.2. *Assessment Explanation.* Test administrator must read the push-up and sit-up script then demonstrate proper techniques ([A3.3](#)). (T-2).

3.7.1.3. *Stopwatch.* Test administrator is responsible for operating the stopwatch. The administrator will start the stopwatch when the Airman is instructed to begin, observe the assessment and notify the Airman how much time is remaining at 30 seconds and 15 seconds. (T-2). Prior to beginning the assessment, the assessor will inform the Airman to continue to perform push-ups and sit-ups until directed to stop or until the Airman is no longer able to continue. (T-2).

3.7.1.4. *Counting and Monitoring.* FAC augmentee or another Airman paired to accomplish muscle fitness components will monitor and count the correct number of push-ups and sit-ups. **(T-1).** When Airmen are paired off for the assessment, the FAC will oversee and spot-check technique to ensure accurate and safe assessment. **(T-1).** The counter or monitor counts the number of push-ups and sit-ups out loud. If the Airman breaks correct form, the counter or monitor repeats the last correct number (e.g., one, two, three, three, four), as well as gives instruction on what was done incorrectly (e.g., you are not extending your arms fully without locking, keep your back straight or your shoulder blades are not touching the mat or floor, keep your hands on your shoulders or chest). Counter, FAC staff or PTL will monitor the Airman from a position that allows observance of the Airman's form and the arm angles or allows observance to ensure the shoulder blades touch the floor and elbows touch the knees or thighs. **(T-1).**

3.7.1.5. *Completion and Recording.* Upon completion of the assessment, FAC staff or PTL will record the total number of correct push-ups and sit-ups. **(T-1).**

3.8. Fitness Assessment Composite Score. The categories of fitness assessment scores are: excellent (composite score ≥ 90), satisfactory (composite score of 75 - 89.9), unsatisfactory (composite score ≤ 74.9 and or one or more component minimums not met), and exempt. **Note:** Airmen must be exempt in all four components to be entered exempt in AFFMS II. **(T-1).** For deployment or extended temporary duty assignment (TDY) purposes, Airmen must be categorized as excellent, satisfactory, or unsatisfactory before being updated as exempt in AFFMS II. **(T-1).**

3.8.1. *Scoring.* Scoring the minimum component points in all fitness assessment components does not generate enough points to earn a composite score of 75 or greater. The minimum components are established to ensure that Airman test adequately in all components rather than excelling in some and disregarding others. Points below the required minimum component values read zero.

3.8.2. Target values are designed to illustrate a combination of component points which would equal an overall 75 composite score. Airmen failing to meet a target component value, but still scoring at or above the minimum component point value (lowest "fitness or health risk" limit), can still pass the assessment by exceeding targets in other components.

3.8.3. Age and gender-specific fitness score charts are provided in [Attachments 2](#). **Note:** The day of the assessment, Airmen use the chart of their current age.

3.8.4. Airmen receive a composite score on a 0 to 100 scale based on the following maximum component scores: 60 points for aerobic, 20 points for body composition, 10 points for push-ups and 10 points for sit-ups.

3.8.5. *Scoring for exemptions.* Airmen with an AF Form 469 prohibiting them from performing one or more components of the fitness assessment will have a composite score calculated on the assessed components. **(T-2).** Abdominal circumference will be performed on all Airmen, unless exempted by medical provider. **(T-2).** Airmen must achieve a minimum of 75 adjusted points, based on points available, and meet minimum component standards in order to receive a satisfactory rating. **(T-1).**

3.8.5.1. *Example 1.* A female Airman, age 28, is exempted from push-ups: If the Airman receives 49.3 points for aerobic fitness, 17.6 points for abdominal circumference and 8

points for sit-up component; the total component points achieved = 74.9. Possible points from aerobic fitness, abdominal circumference, and sit-up components = 90 points. Composite score is: $(74.9/90) \times 100 = 83.2$ points. As long as the Airman meets component minimums and achieves an overall composite score of 75 or more, then the Airman receives a satisfactory rating.

3.8.5.2. *Example 2.* A male Airman, age 44, is exempted from aerobic fitness: If the Airman has a 39.5 inch waist and receives 0 points for abdominal circumference, 9.5 points for push-ups and 9.4 points for sit-ups; the total component points achieved = 18.9. Possible points from abdominal circumference, push-up and sit-up components = 40 points. Composite score is: $(18.9/40) \times 100 = 47.3$ points. The Airman receives an unsatisfactory score because the Airman did not meet minimum abdominal circumference requirement of 39.0 inches and did not receive a minimum of 75 points.

3.8.5.3. *Example 3.* Airmen testing on abdominal circumference-only: Airmen testing on just the abdominal circumference are only required to meet the minimum component standard in this area to pass the assessment. As such, an abdominal circumference of ≤ 39.0 for males and ≤ 35.5 for females will result in a satisfactory rating. **Note:** All measurements between the abdominal circumference target and minimum will yield an overall fitness assessment score of 75.0 (e.g., Male: abdominal circumference of 38.0 – 39.0 = 75.0 points; Female: abdominal circumference of 34.5 – 35.5 = 75.0 points)

3.8.5.4. Airmen with a chronic medical condition, documented appropriately as a “chronic component exemption” only on an AF Form 469, that achieve a score of 90 or above (excellent) on the remaining components (using calculations above) will be tested annually. **(T-2).** Example: Airman has a chronic medical condition and is exempted from the run but can test on the walk: If the Airman is female and 35 years of age, passes the walk test, receives 17.6 points for abdominal circumference, 9.5 points for push-ups and 10.0 points for sit-ups; the total component points achieved = 37.1. Total possible points from abdominal circumference, push-ups and sit-up components = 40 points. Composite score is: $(37.1/40) \times 100 = 92.75$. The Airman scored above a 90 (excellent) and will test annually. **Note:** Every 365 days chronic medical conditions with profiles are reviewed by medical to determine if they are still valid. **(T-2)**

3.9. Scheduling. Frequency of an official PFA is based on the previous fitness score. An Airman may schedule an earlier PFA to accommodate a TDY, Professional Military Education or other training course, Permanent Change of Station move, leave schedule, or other situation that has been previously approved and would preclude Airmen from maintaining fitness currency. **(T-1).** Airmen may volunteer to perform an official PFA early in their testing cycle (one month or more prior to current due date) provided they do not have any fitness restrictions annotated on a complete AF Form 469. Commanders will not direct out of cycle official PFAs. **(T-1).**

3.9.1. Excellent. All Airmen will test by the last day of the 12th calendar month following the previous excellent test as outlined above. **(T-1).** **Note:** Airman must have earned an excellent by completing all four fitness assessment components (1.5 mile run; abdominal circumference measurement, push-ups and sit-ups) or be on a medical profile and declared medically incapable of performing one or more components of the fitness assessment and

achieve a composite score of 90 or above on the remaining components in order to test on a 12-month currency cycle. **(T-1)**.

3.9.2. Satisfactory. RegAF, AFR, and ANG Title 10 Statutory Tour and Title 32 Active Guard/Reserve (AGR) Airmen who score a satisfactory score on a fitness assessment must complete an official fitness assessment at a minimum of twice per year. **(T-1)**. RegAF, AFR, and ANG (Title 10 Statutory Tour and Title 32 AGR) Airmen with a current satisfactory fitness assessment will test by the last day of the 6th calendar month following the previous satisfactory test (e.g., if Airman tested on 15 April, then Airman must retest on or before 31 October of the same year). **(T-1)**. ANG Title 32 Drill Status Guardsmen must complete an official fitness assessment at least annually and must be tested by the last day of the 12th month following the previous satisfactory test, **(T-1)**.

3.9.3. Unsatisfactory. RegAF, AFR, and ANG (Title 10 Statutory Tour and Title 32 AGR) Airmen must test within 90 calendar days (180 calendar days for Title 32-Drill Status Guardsmen) following an unsatisfactory / FAIL PFA. **(T-1)**. Unit commanders shall not mandate Airmen to test any sooner than the end of the 90day (180 calendar days for Title 32-Drill Status Guardsman) conditioning period (AFR Commanders may mandate fitness testing after 60 calendar days to ensure currency). **(T-2)**. However, Airmen may voluntarily test before the end of the 90-day (180 calendar days for Title 32-Drill Status Guardsman) conditioning period. It is the Airman's responsibility to ensure they test before the 90-day conditioning period expires as non-currency begins on the 91st calendar day (181st calendar day for Title 32-Drill Status Guardsman).

3.9.4. Airmen require commander's approval to test earlier than 42 calendar days (90 calendar days for ANG Title 32 Drill Status Guardsmen) following an unsatisfactory / FAIL PFA. **Note:** Scientific evidence and medical rationale support a minimum of 42 calendar days to condition in a physiologically realistic manner from unsatisfactory to satisfactory status that also attenuates risk of injury.

3.10. Diagnostic Physical Fitness Assessment. A diagnostic PFA is a non-attribution assessment aimed to provide feedback and help Airmen identify and improve any problem areas. To conduct a diagnostic PFA, members will follow the same standards and procedures for an official PFA outlined in this chapter.

3.10.1. Diagnostic PFAs must be conducted by a certified and officially appointed PTL. **(T-1)**.

3.10.2. Airmen who have a current PFA on file (regardless of score or exemption status on last PFA) and not presently exempt may voluntarily complete a diagnostic PFA no later than 15 calendar days prior to the expiration of their current PFA (scheduling subject to training and mission needs). Airmen who are not current are not eligible to take a diagnostic PFA.

3.10.3. Airmen may attempt at least one but no more than three diagnostic PFAs per calendar year. The initiation of any measured component (for Tier 1 PFA: AC, push-ups, sit-ups, run/walk) of the PFA will be considered an attempt. **Note:** commanders may establish local guidelines regarding the number of diagnostic PFAs they can support, taking into consideration mission, safety, resource availability and any other factors. However, commanders will not eliminate the opportunity for Airmen to take at least one voluntary diagnostic PFA each year. **(T-2)**.

3.10.4. Airmen will be notified of their overall score after completing the diagnostic PFA. **(T-3)** If the result is a passing score, the Airman must decide whether to make the diagnostic PFA official by initialing next to their total score and fitness category section, prior to leaving the testing location. Only after an Airman elects to count the diagnostic PFA will the results be recorded in Air Force Fitness Management System II. Airmen may not be directed to make a diagnostic PFA official. **(T-2)**.

3.10.5. Unit Fitness Program Managers are responsible for tracking the number of diagnostic PFAs attempted by each Airmen in their respective units.

3.10.6. Units using the FAC to conduct diagnostic PFAs will supply PTLs to augment the FAC for the assessments.

3.11. Currency. Each Airman is responsible for knowing the block of time within which their PFA is required. Currency is established upon completion of the following program requirements based on the Airman's most recent PFA. Airmen who do not have a PFA scheduled in the period to remain current must notify their designated FAC staff, UFPM, or superior authority and request that it be scheduled immediately for accomplishment within the required window. **(T-2)**.

3.12. Waivers. If an Airman is unable to complete any required portion of the physical fitness program (PFP) (e.g., fitness assessment, intervention classes), the Airman must receive written approval ([Table 4.1](#)) from the unit commander for rescheduling. **(T-3)**. A copy of the written approval is filed by the UFPM in the Airman's PFP case file. For ARC Airmen unable to complete any scheduled fitness assessment, the Airman must be rescheduled to test on the next date the Airman is in a qualified duty status and official fitness assessments are being conducted. **(T-0)**.

3.13. Illness or Injury. If an Airman becomes ill or injured during the fitness assessment, the airman has the option to be evaluated at the MTF whether or not he/she completes the fitness assessment. Before departing the test location, Airmen must notify FAC staff of the presence of illness or injury by checking the illness or injury block on the AF Form 4446. **Note:** ARC Airmen must promptly report any medical condition (e.g., disease, injury, operative procedure or hospitalization) that might impact their utilization and readiness to their commander, supervisor, or supporting military medical facility personnel. **(T-1)**. Each commander and supervisor must notify the servicing medical facility when they become aware of any changes in an ARC Airmen's medical status including any medical condition that occurred during the fitness assessment and or prevented the Airman from completing the fitness assessment. **(T-1)**.

3.13.1. Airmen will inform their chain of command regarding the injury or illness immediately after the fitness assessment. This is to ensure communication between the MTF and FAC staff occurs prior to score entry into AFFMS II. **(T-1)**. If the illness or injury block of the AF Form 4446, the FAC staff (or UFPM where no FAC exists) will sign the form acknowledging that they will hold scores to allow for medical evaluation and commander review. **(T-1)**. Additionally, the FAC staff, UFPM and PTL will transmit a copy of the AF Form 4446 to the UFPM for the Unit Commander's review within two duty days. **(T-2)**. For RegAF and ARC Active Guard Reserve (AGR) Airmen, the FAC will enter the fitness assessment results in AFFMS II on the 6th duty day if the Commander does not invalidate test results or no response from the Commander is received within this timeframe. **(T-2)**. For Title-32 Drill Status Guardsmen, Title-10 Active Duty Operational Support, and Traditional

ARC Airmen, the FAC will enter scores into AFFMS II at the conclusion of the next Unit Training Assembly if the Commander does not invalidate the test results or no response received from the Commander. **(T-2)**.

3.13.2. If the medical evaluation validates the illness or injury ([Attachment 8](#)), the Unit commander may invalidate the fitness assessment results by checking the “I render this test invalid” block of the AF Form 4446, signing, and returning the form to the FAC. If the fitness assessment is invalidated, the Airman will be required to retest on all non-exempt fitness assessment components within five duty days from original fitness assessment test date. If an AF Form 469 is required, an additional five duty days from medical evaluation date will be allowed for the AF Form 469 to be generated and provided. Title-32 Drill Status Guardsmen, Title-10 Active Duty Operational Support, and Traditional ARC Airmen will be required to retest next Unit Training Assembly and official fitness assessments are being conducted, but not earlier than five duty days from the original fitness assessment test date. **(T-2)**. **Note:** Original fitness assessment will count unless rendered invalid by the Unit Commander. **(T-1)**.

3.14. Deployments. Airmen must have a current fitness assessment on file prior to arrival at their deployed location. **(T-2)**. For purpose of the PFP, “current fitness assessment” refers to a fitness assessment that has not expired regardless of the assessment score. Airman with an unsatisfactory fitness assessment are not prohibited from deploying. Airmen may deploy if they meet the fitness assessment scheduling requirement based upon their most recent fitness assessment recorded in the AFFMS II. Airmen are not considered Exempt in the deployed location until their current fitness assessment expires. Commanders will mark “Exempt” when the Airman’s current fitness assessment expires in a deployed location where they cannot test or choose not to volunteer to test at locations where fitness assessment testing is available. **(T-1)**. In locations where the Airman is able to test on an approved track or course, the Airman is expected to maintain currency and must complete the fitness assessment prior to expiration of currency. **(T-1)**. **Note:** See [Table A7.1](#) optional commander actions upon fitness assessment failure.

3.14.1. FACs will annotate failures in AFFMS II. **(T-1)**. However, if an Airman reaches the 91-day mark after the fitness assessment (failure), but before the evaluation closes out, the unsatisfactory score is no longer current and the Commander will mark the evaluation as exempt. **(T-1)**. For satisfactory and excellent scores, deployed Airmen become exempt when they reach the first day of the 7th/13th month following the previous official fitness assessment rating.

3.14.2. Home station UFPD will notify the FAC to update AFFMS II placing the deployed Airman in exempt status after their “current” fitness assessment expires. **(T-2)**. UFPDs performing FAC duties at Geographically Separated Units will update exempt status in AFFMS II for Airmen. **(T-1)**. **Note:** The end date or duration of the deployment exemption should include in the 42-day reconditioning period (90 calendar days for Title 32 Drill Status Guardsmen and Traditional AFR) afforded to all Airmen returning from a deployment of greater than 30 calendar days.

3.14.3. Airmen who are due to take a fitness assessment upon return from deployment will be given 42 calendar days for post deployment reconstitution and training from the date they sign into their home unit. **(T-2)**. UFPMs must communicate with the FAC when Airman return from deployment. **(T-3)**.

3.14.4. RegAF and Title 32 AGR personnel deployed for greater than 30 consecutive days will be given a 42-day acclimatization period starting the date they arrive back at home station prior to taking their fitness assessment, unless the Airman requests to be assessed earlier. **(T-2)**. All Title 32 Drill Status Guardsmen and Traditional Air Reserve personnel will be given a 90-day acclimatization period starting the date they arrive back at home station prior to taking their fitness assessment, unless the Airman requests to be assessed earlier. **(T-2)**. The Airman will become noncurrent on day 43 (day 91 for Title 32 Drill Status Guardsmen and Traditional Air Reserve), if applicable. **(T-2)**. **Note:** Officer Performance Reports or Enlisted Performance Reports that close out during this post deployment 42-day reconditioning period will be marked “exempt”.

3.15. Extended TDY. For the purpose of this manual, extended TDY is defined as more than 30 consecutive days. **(T-2)**.

3.15.1. Airmen must have a current fitness assessment prior to departure to an extended TDY location. **(T-1)**. Airmen will not be considered Exempt at the extended TDY location until their current fitness assessment expires. **(T-2)**. Exempt will be marked when the Airman’s current fitness assessment expires at the extended TDY location. **(T-2)**. **Note:** The deployment exemption category in AFFMS II will be utilized to annotate Airmen whose fitness assessment expired during an extended TDY. **(T-2)**.

3.15.2. RegAF, Title 10 Statutory Tour, and Title 32 AGR personnel TDY for greater than 30 consecutive days will be given a 42-day acclimatization period starting the date they arrive back at home station prior to taking their fitness assessments, unless the Airman requests to be assessed earlier. **(T-2)**. All Title 32 Drill Status Guardsmen and Traditional Air Reserve personnel will be given a 90-day acclimatization period starting the date they arrive back at home station prior to taking their fitness assessment, unless the Airman requests to be assessed earlier. **(T-2)**. Airman will become noncurrent on day 43 (day 91 for Title 32 Drill Status Guardsman and Traditional Air Reserve), if applicable. **(T-2)**.

3.16. Installations with Extreme Weather Conditions and or Higher Altitudes. Installation commanders may request a waiver from MAJCOM deputy commanders or equivalent to adjust scheduling of cardiorespiratory components for extreme weather conditions or during natural disasters **Note:** if an appropriate indoor facility is not available. Installation Commanders must specify periods unable to complete the run or walk assessment safely. Any approved installation waiver will be extended to all tenant units physically located on the installation. **(T-2)**. If the installation commander does not approve an installation-wide waiver the ARC MAJCOM deputy commander (or equivalent) that owns the tenant unit also has the authority to approve a tenant waiver for their subordinate organizations. Airmen will still test on remaining components and will be granted an exemption from the aerobic component of the test for the time period specified in the approved waiver. **(T-2)**. RegAF, Title 10 Statutory Tour and ARC AGR Airmen will be required to test again in six months, even if they score 90 or above. **Note:** In the event fitness assessments cannot be accomplished for unexpected circumstances (e.g., air quality inside the fitness center being impacted by the smoke in the air because of wildfires), assessments should

be suspended and Airmen exempted from all components except abdominal circumference. The exemption automatically terminates 42 calendar days after suspension or at the discretion of the commander, whichever is soonest.

3.16.1. MAJCOM/A1s will forward a copy of approved waivers to AFPC/DP3SA. **(T-1)**. For ARC stand-alone installations, AFRC/A1 and NGB/A1 will forward a copy of approved waivers to AFPC/DP3SA. **(T-1)**.

3.16.2. ARC Airmen who commute from a lower altitude to perform duty at their assigned/attached unit at a location where the altitude $\geq 5,250$ feet, may perform fitness assessment with an AF unit at or near their home altitude, with commander's approval. The UFPM at the unit of assessment forwards a copy of fitness assessment results to ARC Airmen's assigned or attached UFPM for AFFMS II update and tracking purposes. This variation is only for ARC Airmen who are not afforded the 42-day acclimatization period at the assessment site.

3.17. Course Requirements for 1.5-mile run and 2.0-kilometer walk. The 1.5-mile timed run is 2640 yards or 2414 meters and the 2.0-kilometer timed walk is 2187 yards or 2000 meters. Establish a standard course of accurate distance that is as level and even as possible. All courses and tracks may be used at the discretion of Installation Commander, however they must be certified and in conjunction with local CES, FSS, and Wing Safety established procedures in addition to the requirements in this chapter. The Installation Commander will recertify running surfaces after damage, modification or repair. **(T-2)**.

3.17.1. If a typical six lap track is used:

3.17.1.1. The 1.5-mile timed run, should be 440 yards per lap; or six laps on a 400-meter track plus an additional 46 feet (14 meters) for 1.5-miles.

3.17.1.2. The 2.0-kilometer timed walk, should be five laps on a 400-meter track or four laps on a 440 yard track plus an additional 427 yards.

3.17.2. If a course is used:

3.17.2.1. The 1.5-mile timed run, should be 2640 yards or 2414 meters.

3.17.2.2. The 2.0-kilometer timed walk, should be 2187 yards or 2000 meters.

3.17.2.3. Course should have limited exposure to traffic, should not have a continuous incline or decline or rolling hills; and avoid slopes exceeding two degrees.

3.17.2.4. If using a road course, where possible, start and finish should be at the same location. Clearly mark the start and finish lines (and half-way point for road courses).

3.17.3. Trained personnel will monitor participants, ensuring all Airmen complete entire course and are continuously observed for course completion, safety, counting laps if required and recording run times. **(T-1)**.

3.17.4. Indoor track may be used at the discretion of installation leadership, however the track must be certified with the same standards in this chapter.

3.18. Evaluate Course and Track Safety and Environmental Conditions. Evaluation is necessary to determine if assessment can be properly conducted.

- 3.18.1. Snow: no snow accumulation on the running surface.
- 3.18.2. Ice: no ice on the running surface that cannot be easily observed and avoided.
- 3.18.3. Water (rain): no standing water that a large group cannot easily avoid on the running surface. No significant rain as defined as measurable at greater than or equal to 0.10 of inch per hour. If assessing on a wet day (rain, mist or heavy dew), the temperature must be > 34 degrees Fahrenheit, including wind chill.
- 3.18.4. Mud: no mud on the running surface that cannot be easily avoided.
- 3.18.5. Lightning: no lightning within five nautical miles (~six miles) and wait at least 30 minutes after the last observed lightning.
- 3.18.6. Hail: no hail forecasted or reported within 25 miles.
- 3.18.7. Shelter: establish a safe shelter procedure if there is any storm threat.
- 3.18.8. Visibility: must be greater than $\frac{3}{4}$ mile if crossing or running beside vehicular traffic.
- 3.18.9. Light: reflective belts or vests are required if running near traffic from one hour before sunset to one hour after sunrise.
- 3.18.10. Intersections: crossing guards with reflective safety vests or lights must be positioned at all active intersections. **(T-2)**.
- 3.18.11. Medical: establish a method of communication or access for emergency medical services (e.g., cell phone, hand-held radio) to call 911. An AED will be on-site and immediately available for all portions of fitness assessment. **(T-1)** AEDs should remain until all participants assessment participants leave. Water should be provided, if available, during the fitness assessment. **Note:** Safety is the number one concern. If during or after the test, the Airman experiences unusual shortness of breath, chest pain, dizziness or lightheadedness, or any other unusual symptoms, notify PTL or fitness assessment administrator immediately.
- 3.18.12. Wind Speed: max wind allowed ≤ 15 mph sustained, or ≤ 20 mph gusting.
- 3.18.13. Cold Stress: air temperatures must be ≥ 20 degrees Fahrenheit with wind ≤ 15 mph sustained, ≤ 20 mph gusting.
- 3.18.14. Heat Stress: wet bulb globe temperature may be used at the start of the walk or run component (should be ≤ 86 degrees Fahrenheit). Consult with base environmental engineering, base weather, or civilian agencies to determine environmental conditions. **Note:** Devices used to measure wet bulb globe temperature must be certified by bio environmental or civilian agencies.

3.19. 2.0-Kilometer Timed Walk Instructions and Standards.

- 3.19.1. Criteria. The following criteria must be considered prior to the 2.0-kilometer timed walk assessment.
 - 3.19.1.1. Airmen should warm-up prior to beginning the assessment.
 - 3.19.1.2. Course safety and environmental conditions as described in [Chapter 3](#).

3.19.2. Requirements:

3.19.2.1. A measured 2.0-kilometer, uninterrupted course approved by the installation commander (or equivalent). The course will meet requirements in this chapter, with the exception of the number of laps.

3.19.2.2. Sufficiently trained personnel must be present to monitor Airmen at all times, to record laps if necessary, and to record walk completion times. **(T-1)**.

3.19.2.3. Additional equipment requirements include timers, notepads, scorecards, and pens or pencils.

3.19.3. Administering the 2.0-kilometer walk assessment. Airmen performing the 2.0-kilometer (2,000 meters) will walk as quickly as possible. **(T-1)**. Airmen must walk but not run, keeping at least one foot in contact with the ground at all times. **(T-1)**.

3.19.4. Scoring results of the 2.0-kilometer walk assessment. The walk test is a pass or fail assessment. No points are awarded for successful completion. If an Airman passes the 2.0 km walk test, the Airman will have a composite score calculated on the assessed components in the same way the score would be calculated if the Airman were exempt from the aerobic component. **(T-1)**.

Table 3.1. Walk Standards (2.0-Kilometer).

Male Standards		Female Standards	
Age (yrs)	Maximum Time (mins:secs)	Age (yrs)	Maximum Time (mins:secs)
< 30	16:16	<30	17:22
30-39	16:18	30-39	17:28
40-49	16:23	40-49	17:49
50-59	16:40	50-59	18:11
60+	16:58	60+	18:53

Chapter 4

EXEMPTIONS

4.1. General. Exemptions are designed to categorize Airmen as unable or unavailable to train or assess for a limited time period. Exemptions, for medical reasons, are entered into AFFMS II using the current AF Form 469 following fitness assessment completion. **(T-1).**

4.2. Exemptions. Commanders may only grant exemptions as outlined in [Table 4.1](#) Airmen with exemptions prohibiting them from performing one or more components will be assessed on the remaining components and scored in accordance with [paragraph 3.10](#) **(T-1)**. Physical fitness assessment (PFA) exemptions for medical reasons can only be made by a MTF provider (or ARC Medical Liaison Officer). All Airmen will complete an abdominal circumference assessment, unless they have a Deployment Availability Working Group approved exemption for a condition that would warrant abdominal circumference assessment exemption. **(T-1)**. The Deployment Availability Working Group reviews all non-pregnancy related abdominal circumference exemption requests. Abdominal circumference component exemptions will not be granted for non-medical reasons (e.g., physique that nonetheless has abdominal circumference that exceeds AF standards). Medical issues are determined by the Airman's Primary Care Manager and is the only consideration required or allowed to grant an abdominal circumference exemption.. Temporary exemptions will not be issued for Airmen still currently assigned to a unit solely for the purpose of improving currency compliance rates (e.g., where Airman is not on terminal leave). **(T-1)**.

4.2.1. An Airmen is exempt from taking any additional official fitness assessments when:

4.2.1.1. The Airmen has a passing fitness assessment within 12 months of their effective retirement or separation date from military service.

4.2.1.2. The Airmen is exempt from the fitness assessment but is current within 12 months of their effective retirement or separation date from military service. **Note:** Airmen cannot exceed 365 days for an official fitness assessment. If the retirement or separation date is cancelled, Airmen will complete the fitness assessment in accordance with their original fitness assessment cycle (e.g., six or 12 months) or, if the original cycle date has passed, within 42 calendar days (re-acclimation time). **(T-1)**.

4.2.2. Airmen with chronic medical Duty Limiting Conditions preventing them from performing one or more components of the fitness assessment will be medically reviewed during the annual physical health assessment, at a minimum, and referred to the Deployment Availability Working Group for evaluation as appropriate in accordance with AFI 10-203, AFI 48-123, *Medical Examinations and Standards*, and Air Force Manual (AFMAN) 41-210, *Tricare Operations and Patient Administration*. **(T-1)**.

4.2.3. The UFPD will identify Airmen who have had four temporary component exemptions in one or more components within a 24-month period. **(T-1)** The Unit Program Fitness Manager will notify the unit commander, who will, in turn, request the Chief of Aerospace Medicine or ARC Medical Liaison Officer review the case at the Deployment Availability Working Group. **(T-1)**. The Deployment Availability Working Group will review and evaluate the Airman's medical history and determine the best course of action in accordance

with AFI 10-203. **(T-1)**. Example: An Airman who was exempt from sit-ups in April 2010 fitness assessment, exempt from sit-ups and push-ups in October 2010 fitness assessment, exempt from 1.5 mile run or 2.0 kilometer walk in April 2011 fitness assessment and exempt from sit-ups in October 2011 fitness assessments must be recommended by the unit commander for review at the Deployment Availability Working Group.

4.2.3.1. Providers will list physical limitations and fitness assessment exemptions on the AF Form 469. **(T-1)**. Unless given a composite exemption, an Airman will continue to prepare for and be assessed on the non-exempt component(s) of the fitness assessment.

4.2.3.2. A military provider must make the final disposition for any physical limitations in cases where Airmen are seen by non-military providers or when ARC Airmen bring recommendations from their personal care provider. **(T-1)**. Limitations will be transcribed by an AF provider to an AF Form 469 in accordance with AFI 10-203.

4.2.3.3. The expiration date on the AF Form 469 represents the date the Airman is medically cleared to resume physical activities previously restricted.

4.2.3.3.1. For Duty Limiting Conditions of 30 calendar days or less, Airmen may be tested on all four components within 30 calendar days (60 calendar days for ANG Title 32 Drill Status Guardsmen) after profile expiration.

4.2.3.3.2. For Duty Limiting conditions lasting 31 calendar days or more, Airmen are allowed a 42-day reconditioning period upon profile expiration. Airmen will be tested no earlier than the end of the reconditioning period and no later than 30 days after the reconditioning period. **(T-1)**.

4.2.3.3.3. The reconditioning period for ANG Title 32 Drill Status Guardsmen is 90 calendar days, testing must occur no later than 60 calendar days after the end of the reconditioning period. **(T-1)**.

4.2.3.4. Airman with an AF Form 469, lasting any length of time, must maintain fitness assessment currency standards. **(T-1)**. If an Airman is due to test during the AF Form 469 effective dates or during the 42-day reconditioning period, the Airman will complete the fitness assessment components that he or she is cleared to test on per the AF Form 469. **(T-1)**. If the Airman has an unsatisfactory assessment they shall not volunteer to test early or before their 90-day reconditioning period. **(T-2)**.

4.2.4. Pregnancy. Medical Provider will include information on physical activity during prenatal counseling. **(T-2)**. Pregnant ARC Airmen should discuss their physical fitness program (PFP) with their personal care provider.

4.2.4.1. Airmen will be exempt from the fitness assessment during pregnancy. **(T-1)**.

4.2.4.1.1. Airmen with pregnancies lasting 20 weeks or more are exempt from fitness assessment for 12 months after discharge from the hospital upon completion of pregnancy (delivery, miscarriage). To remain current the Airman must test no later than the last day of the 13th month after discharge from the hospital. **(T-2)**.

4.2.4.1.2. Medical Provider will make a determination recommendation for pregnancies less than 20 weeks.) **(T-1)**.

4.2.4.2. Pregnancy-related exemptions apply to the fitness assessment and do not exempt the Airman from participating in an approved PFP. If a pregnancy ends prior to 20 weeks, the provider (or ANG Wing Medical Group) will re-accomplish an AF Form 469, in accordance with AFI 10-203.

4.2.4.3. The provider will determine the expiration date on the AF Form 469. **(T-1)**. This date is when the Airman is medically cleared to begin an unrestricted physical training program.

4.2.5. PCS Moves. Airmen are allowed a 42-day acclimatization period from the date they arrived on station to complete a PFA. Airmen pending PCS must have a current PFA that does not expire through the report not later than date (RNLTD). **(T-2)**. If the current PFA expires prior to the Airman's RNLTD, the Airman must complete a PFA before departing their losing duty station. **(T-2)**. Exemptions will not be granted for Airmen in outbound status for any circumstance other than those addressed in [Chapter 4](#).

4.2.5.1. Airmen returning from a deployment who PCS before the end of their 42-day post deployment acclimatization period will have their deployment exemption duration extended by the losing home station to cover the additional 42 calendar days they will receive post RNLTD to acclimatize. **(T-2)**. To prevent going non-current, Airman will test 43 calendar days following RNLTD. **Note:** Not applicable if Airman's PFA remains current for 43 calendar days post RNLTD. Airmen who are due to PCS following the completion of the post-deployment acclimatization period must complete a PFA if their PFA is already expired or expires any time prior to their RNLTD plus 42 calendar days. **(T-2)**.

4.2.5.2. Airmen returning from a TDY longer than 90 consecutive days who PCS before the end of their post-TDY 42-day acclimatization period will be granted a composite "deployment exemption" by their losing home station. **(T-2)** This exemption will only be awarded upon expiration of the Airman's current PFA. Exemption duration will not exceed RNLTD plus 42 days. **Note:** Not applicable if Airman's PFA remains current for 43 calendar days post RNLTD. Airmen who are due to PCS following the completion of the post-TDY acclimatization period must complete a PFA if their PFA is already expired or expires any time prior to RNLTD plus 42 calendar days. **(T-2)**.

4.2.5.3. ARC medical unit providers will advise Airmen to consult their personal care provider to recommend specific physical training appropriate for medical condition or may refer the Airman to the FIP, if available. **(T-1)**. MTFs can provide space available evaluation, as required for eligible ARC Airmen at tenant locations. To obtain an exemption based on evaluation and recommendation of personal care provider, the Airman must provide the ARC medical unit with medical documentation to include diagnosis, treatment, prognosis, and period and type of physical limitations or restrictions. **(T-1)**. Individual Reservists may be referred by the MTF to their personal care provider or ARC Exercise Physiologist at stand-alone locations where applicable.

4.3. Exemption Categories.

4.3.1. Component Exemption. An Airman is exempt from one or more components of the fitness assessment, but will be assessed on remaining components.

4.3.2. Composite Exemption. An Airman is exempt from all components of the fitness assessment.

4.3.2.1. Composite Deployment Exemption. Airmen deployed for less than one year on Contingency Exercise Deployment or Military Personnel Appropriation orders in direct support of a contingency will receive a composite deployment exemption following the expiration of their current fitness assessment in the deployed location. All Airmen with a composite deployment exemption may complete fitness assessments on a voluntary basis only. Airmen may volunteer to test during either the post-deployment or extended TDY or acclimatization period but cannot be directed to do so.

4.3.2.2. Permanent party personnel and 365-day deployers will test when their current fitness assessment expires in the deployed location, unless the location is not resourced, equipped, or otherwise capable of administering fitness assessments. **(T-1)**. If testing for the permanent party personnel and 365-day deployers is not feasible, the Air Component Commander must grant a composite deployment exemption to all individuals deployed.

Table 4.1. Exemptions.

Type	Definition	Assessment or Reassessment Requirements
Commander (Composite)	Airman is unable to complete an assessment for a time-limited, unforeseen catastrophic event that precludes training and assessment for greater than 30 calendar days (e.g., natural disasters). Commanders <u>will</u> exempt Airmen who are incarcerated or on appellate or excess leave pending separation. (See Note 3) (T-1) .	If the exemption exceeds 30 calendar days, the Airman will be given 42 calendar days (90 calendar days for ANG Title 32 Drill Status Guardsmen) following the expiration of the exemption for training. (See Note 1) (T-2) .

Deployment (Composite)	Airmen due to deploy must have a current fitness assessment score on file prior to departure. A current fitness assessment is one that has not expired, regardless of the assessment score as the date the Airman departs home station for the deployed location. (T-1) . Airmen deployed for less than one year on Contingency Exercise Deployment or Military Personnel Appropriation orders in direct support of a contingency will receive a composite deployment exemption following the expiration of their current fitness assessment in the deployed location. (T-1) .	RegAF and Title 32 AGR Airmen deployed for greater than 30 consecutive days will be given a 42-day acclimatization period starting the date they arrive back at home station prior to taking their fitness assessment. Title 32 Drill Status Guardsmen and Traditional Air Reserve personnel will be given a 90-day acclimatization period starting the date they arrive back at home station prior to taking their fitness assessment. (T-2) .
Extended TDY (Composite) *use Deployment (Composite) exemption for AFFMS II input	Granted only to Airmen TDY more than 30 consecutive days whose current fitness assessment expires at the extended TDY location. Airmen returning from an extended TDY (> 30 consecutive days) who PCS before the end of their post-TDY 42-day acclimatization period may be granted a “deployment exemption” by losing home station. This exemption will only be awarded upon expiration of the Airman’s current fitness assessment. Exemption duration will not exceed RNLTD plus 42 calendar days. (T-1) .	RegAF and Title 32 AGR personnel TDY for greater than 30 consecutive days will be given a 42-day acclimatization period starting the date they arrive back at home station prior to taking their fitness assessment. (T-2) . Title 32 Drill Status Guardsmen and Traditional Air Reserve personnel will be given a 90- day acclimatization period starting the date they arrive back at home station prior to taking their fitness assessment. (T-2) . Airman who PCS following an extended TDY but cannot complete the 42-day acclimatization period at losing home station will be assessed 43 calendar days following their RNLTD. (T-2) .
Medical (Composite)	Airman is prohibited from completing all components of the fitness assessment due to medical conditions, other than pregnancy (e.g., convalescent leave)	The Airman will have allowed 42 calendar days (90 calendar days for ANG Title 32 Drill Status Guardsmen) for reconditioning following the expiration of the medical exemption. (T-

Medical (Component)	Airman is prohibited from performing one or more components of the fitness assessment. The medical provider or Medical Liaison Officer, may grant exemption from aerobic and muscle fitness components of physical training or fitness assessment based on medical evaluation in accordance with paragraph 2.14.2 for a time-limited period. Other components of the fitness assessment will still be assessed. (T-1) .	Upon expiration of the exemption, or when the medical provider or Medical Liaison Officer clears the exempted component of assessment, the Airman will meet their next scheduled fitness assessment. (T-1) . If the exemption exceeded 30 calendar days, the Airman will have allowed 42 days (90 days for ANG Title 32 Drill Status Guardsmen) for training following the expiration of the component exemption. (T-1) . If an Airman's next required fitness assessment is due during the AF Form 469 effective dates or 42 calendar day (90 calendar days for ANG Title 32 Drill Status Guardsmen) training period, they will only test on components they are cleared to test on to prevent going "non-current" (See Note 2). (T-1) .
Non-Participating ARC Only	ARC only: Non-participating ARC Airmen listed on unit roster, but unable or unavailable to participate for pay or points (examples are new accessions awaiting Officer Training School or Basic Military Training) may be classified under commander exemption in AFFMS II.	Exempt until resolved. If the exemption exceeds 30 calendar days, the Airman is given 42 calendar days following the expiration of the exemption for training.
Pregnancy (Composite)	Airman is prohibited from completing fitness assessment due to pregnancy. Pregnant Airmen who were in the unsatisfactory fitness category prior to becoming pregnant will continue to participate in the FIP. (T-1) .	The Airman must test no later than the last day of the 13th month after discharge from the hospital for a pregnancy lasting 20 weeks or more. (T-1) . For pregnancies that end prior to 20 weeks, see paragraph 4.2.4.1 . For ANG Title 32 Drill Status Guardsmen) training period, they will only test on components they are cleared to test on to prevent going "non-current" (See Note 2). (T-1) .

Notes:

1. Commanders should document all non-medical commander exemptions by e-mail or memorandum and forward to the FAC for action. Composite exemptions due to medical reasons can only be granted under the Composite (Medical) exemption type as documented by an AF Form 469.
2. Airmen on consecutive profiles will be given 42 calendar days (90 calendar days for ANG Title 32 Drill Status Guardsmen) following the expiration of the most recent AF Form 469. **(T-1)**.
3. This exemption category is not authorized for medical or currency issues.

Chapter 5

EDUCATION, IMPROVEMENT AND INTERVENTION

5.1. Physical Fitness and Nutrition Education. Physical fitness and nutrition education will be incorporated into training programs and unit physical training. **(T-2).** Ongoing commander emphasis and a supportive environment are essential to maintain the health and fitness of the force.

5.2. The Fitness Improvement Program (FIP). Airmen and their commanders select an option appropriate to their fitness improvement requirements. Available options include, but are not limited to: BE WELL online and Military OneSource Health Coaching. FIP is mandatory for all Airmen with an unsatisfactory fitness assessment score and is available for any Airman who wishes to improve their overall health and fitness. This program targets nutritional and exercise behavior changes necessary to improve Airmen's health and fitness utilizing three intervention options.

5.2.1. RegAF, Title 10 Statutory Tour, Title 32 AGR, and AFR AGR Airmen must start the FIP within 10 duty days of their unsatisfactory fitness assessment. **(T-2).** If Airmen are unable to start within 10 duty days, they must obtain written authorization from their unit commander. **(T-3).** Title 32 Drill Status Guardsmen and Traditional AFR personnel are required to accomplish FIP within 60 calendar days of the unsatisfactory fitness assessment. **(T-2).**

5.2.2. Airmen who receive consecutive unsatisfactory fitness assessments are required to re-enroll in the FIP. Additionally, Airmen who receive nonconsecutive unsatisfactory fitness assessments must start the FIP within 10 duty days of their latest unsatisfactory fitness assessment and 60 calendar days for ARC Airmen. **(T-2).**

5.2.3. UFPM will inform Airmen of FIP requirements and document the FIP start date in the AFFMS II **(T-2).**

5.2.4. Airmen may voluntarily retest before the end of the 90-day (180 calendar days for Title 32-Drill Status Guardsman) reconditioning period. It is the Airman's responsibility to ensure he or she retests before the 90-day reconditioning period expires as non-currency begins on the 91st day (180 calendar days for Title 32-Drill Status Guardsman). Airman on a physical profile refer to [paragraph 4.2](#)

5.2.5. Airmen are ultimately responsible for improving their fitness level to achieve a minimum satisfactory fitness assessment score, and if appropriate, provide documentation of compliance with FIP to their leadership.

5.3. AF Form 108, *Physical Fitness Education and Intervention Processing*.

5.3.1. UFPMs must initiate and annotate mandatory FIP option(s) and appointments on AF Form 108 to include date, time and location.

5.3.2. The Airman signs the AF Form 108 acknowledging FIP enrollment, accepting responsibility for improving their fitness level, completing program requirement and providing documentation of program compliance.

5.3.3. Unit commander or equivalent will use the AF Form 108 as a tool to document mandatory education and intervention requirements. The failure of command or command representatives to sign, annotate, or otherwise complete the AF Form 108 in no way lessens the Airman's overarching responsibility for their own fitness and compliance with AF Fitness standards. **Note:** Barnes Center for Enlisted Education, Senior Enlisted Leader and Noncommissioned Officers assigned duty as Detachment Chief or Academy Commandant have signature authority for the AF Form 108.

5.3.4. The facilitator signs the AF Form 108 upon Airman's completion of the education or intervention program. Facilitator signature on AF Form 108 is not required for online FIP. Annotations can be made on the back of the AF Form 108 for programs requiring multiple attendances.

5.3.5. Commanders or First Sergeants may request a clinical case review on Airmen with unsatisfactory score(s) to determine if there are documented medical conditions that prohibit program success ([Attachment 9](#)). This does not require a face to face encounter with the Airman unless determined by the healthcare provider to be clinically indicated. For purposes of the Physical Fitness Program, obesity will not be used as a diagnosis prohibiting program success.

Chapter 6

SPECIAL POPULATIONS

6.1. Students and Accessions. Commanders, Superintendents, or Commandants of units such as the USAF Academy, Basic Military Training, Advanced Technical Training Centers, Undergraduate Pilot and Navigator Training Centers, Reserve Officer Training Corps, Graduate Medical Education, Post Graduate Allied Health Medical Education, and Air Force Institute of Technology education programs will meet or exceed the minimum fitness assessment standards in this AFMAN. **(T-1).** A current fitness assessment composite score of ≥ 75 (scores are not rounded) and meeting all component minimums are required for all students to graduate from or obtain a commission or enlistment through USAF Academy, Reserve Officer Training Corps, Academy of Military Science, or Basic Military Training. **Note:** Due to short duration of training, this does not include students graduating Officer Training School.

6.1.1. Officer accessions will be given at least 42-days from their Date Arrive Station to acclimatize. **(T-2).** Date arrived station may include technical school or their first duty location. **Note:** For the ANG, newly assessed prior service personnel (officer and enlisted) with a break in service must test no later than 90 calendar days from oath of enlistment or officer accession effective date.

6.1.1.1. Fitness assessment administered at commissioning sources are considered official, provided they are administered in accordance with [Chapter 3](#), and will be recorded into AFFMS II upon arrival at the first duty station.

6.1.1.2. Upon graduation, officers will hand carry the AF Form 4446 for input into AFFMS II by the FAC staff at their first duty station or technical training (UFPm or training instructor), whichever location they report to first. **(T-1).** **Note:** The next test date will be based on guidance in [Chapter 3](#). **(T-2).** If the officer reports to the duty location without an AF Form 4446, the officer must test within 42 calendar days. **(T-2).**

6.1.2. Developmental education students (e.g., Air Force Institute of Technology, Education with Industry, Joint Professional Military Education and students in other civilian institutions) will participate in fitness assessment conducted by local Reserve Officer Training Corps detachments (where available), base of servicing FAC, or other arrangements, as determined by the assigned commander. **(T-1).** Results of fitness assessment will be entered into AFFMS II by FAC. **(T-1).** If a FAC does not exist, UFPms and PTLs will assume the role. **(T-3).**

6.1.3. Basic Military Training and Technical Training students will complete official fitness assessments via training cadre PTLs or Military Training Leaders. The last Basic Military Training fitness assessment must be administered in accordance with [Chapter 3](#) of this AFMAN and will count as an enlisted airman's first official fitness assessment for AFFMS II input. **(T-1).** Graduated Basic Military Training Airmen will hand carry fitness assessment AF Form 4446 (or equivalent form) for input into AFFMS II by the FAC at their first duty station or technical training (Military Training Leader or UFPm), whichever location they report to first. **(T-1).** Technical Training students that become due for their next fitness assessment (at six or 12 months) while attending follow-on training will be tested by a PTL or Military Training Leader. **(T-1).** Airmen and UFPms must be aware of the 42-day

acclimatization period and leave en route duration to determine which base will conduct the fitness assessment to ensure Airmen remain current.

6.1.3.1. Enlistees will be given two assessment opportunities on baseline minimum aerobic and body composition standards upon arrival at Basic Military Training. **(T-1)**. The failure to meet either: 1) aerobic fitness standards of: 1.5 mile run time of 18:30 male, 21:35 female, or 2) body composition standards. Maximum abdominal circumference of 39.0 inches male, 35.5 inches female or maximum body fat of 20% male, 28% female, upon arrival at Basic Military Training deems them physically unable to safely rehabilitate to a passing fitness assessment score within the standard 42-day rehabilitation period.

6.1.3.2. Two-time failures under the standards in [paragraph 6.1.3.1](#) may be immediately processed for entry level separation pursuant to AFI 36-3208, *Administrative Separation of Airmen*. **Note:** ARC Airmen who are awaiting entry into Basic Military Training but are participating at their unit will be exempted from the fitness assessment until such a time they are entered into Basic Military Training. **(T-1)**

6.1.4. Technical training school students will complete official fitness assessments via unit PTLs or Military Training Leaders as required to maintain currency in accordance with [Chapter 3](#). **(T-1)**. Results from fitness assessments conducted at technical training schools will be input by training squadron UFPMS into AFFMS II. **(T-1)**. All permanent training unit personnel (e.g., cadre, instructors) may complete fitness assessments via the PTL.

6.1.5. Professional Military Education. Airmen selected to attend Professional Military Education may be required to take a fitness test outside their normal fitness assessment cycle as part of the Professional Military Education eligibility requirement. In situations where Airmen with unsatisfactory fitness assessment scores are permitted to attend training, the following rules apply:

6.1.5.1. Airmen enrolled in the FIP must continue with this program and scheduled fitness assessments while in training status. **(T-2)**.

6.1.5.2. Commanders sending Airmen enrolled in the FIP to a training TDY that exceeds six weeks must send the gaining commander or equivalent a memorandum explaining the required intervention, follow-up, and testing ([Attachment 6](#)) at least two weeks prior to TDY. **(T-2)**.

6.1.5.3. The gaining commander or commandant at the TDY location will assume unit commander responsibilities for physical fitness program (PFP) purposes. **(T-2)**.

6.1.5.4. ARC Airmen in all fitness categories going on active duty orders for training must be prepared to participate in PFPs and those in the Self-paced Fitness Improvement Program must participate during periods of active duty. **(T-2)**.

6.2. Geographically Separated Unit or Airman. For the purposes of this manual, a geographically separated unit is defined as a unit that is separated from the host or main operating base that provides support. The host or main operating base is defined as the base where the Airman's military personnel flight is located.

6.2.1. Airmen will complete all components of the fitness assessment in accordance with [Chapter 3](#) of this AFMAN. **(T-1)**.

6.2.2. Where no FAC exists, UFPM or PTL will fulfill the roles. **(T-3)**. Prior to performing official fitness assessments, geographically separated unit commanders will ensure all PTLs have obtained minimal PTL certification from the servicing Force Support Squadron. **(T-1)**. Procedures to ensure these directions are adhered to will be determined by local leadership. Alternatively, Airmen will work with their unit commander to accomplish the fitness assessment at an alternate location where a FAC is available. Unit TDY funds may be used, if necessary.

6.2.2.1. For AFRC geographically separated units, the AFRC Physical Fitness Program Coordinator and supporting FSS will provide support to UFPMs and commanders. **(T-2)**. HQ AFRC Physical Fitness Program Coordinator will support UFPMs at Direct Reporting Units reporting directly to AFRC or a Numbered Air Force. **(T-2)**.

6.2.2.2. For ANG geographically separated units, commanders will assign UFPMs or PTLs to conduct fitness assessments. **(T-2)**.

6.2.2.3. In unique circumstances (e.g., only one Airman at a location), the unit commander may authorize a non-Air Force person (Sister Service) to conduct fitness assessments. This individual must be PTL certified to conduct the fitness assessment. **(T-1)**. A commander may coordinate with the nearest Air Force base's FSS to train and certify non-AF personnel to become PTL certified.

6.2.2.4. When an Airman is the sole Air Force member assigned to a location and has exhausted the authorized alternatives to accomplish the fitness assessment, a waiver may be submitted for AF/A1P consideration, through their MAJCOM to AFPC/DP3SA, requesting an exemption from the fitness assessment for the duration of that assignment.

6.2.3. The host base will provide PFP support if applicable. FAC or authorized personnel will enter the results of the fitness assessment in AFFMS II. **(T-1)**

6.3. Individual Reservists.

6.3.1. The attached or assigned RegAF unit will manage the PFP for Individual Reservists. **(T-2)**. Airmen must be in a qualified duty status during assessment. **(T-0)**.

6.3.2. RIO Detachment Commanders and program managers will monitor the timely completion of PFP requirements with the attached or assigned RegAF unit and the Individual Reservists, and will provide fitness assessment expiration dates if not accessible by the attached or assigned RegAF unit.

6.3.3. Airmen will be assessed by the attached or assigned RegAF unit during the Airman's Annual Tour, if possible, or during an Inactive Duty Training period. **(T-3)**. Airmen will contact the RegAF UFPM to schedule the fitness assessment.

6.3.3.1. Individual Reservists who perform duty at locations outside their commuting area may perform their fitness assessment with an Air Force unit at or near their home, with RegAF commander's approval.

6.3.3.2. The Airman's RegAF UFPM will coordinate a test date and time with the FAC at the Air Force unit that will be conducting the assessment. **(T-2)**. The FAC conducting the assessment will forward or input the test results into AFFMS II and forward a copy of the AF Form 4446 to the owning FAC and UFPM. **(T-2)**.

6.3.4. ARC Airmen shall not perform personal physical fitness activities for the purpose of obtaining participation credit for Annual Training, unit training assembly, Inactive Duty Training, or additional training periods. **(T-2).**

6.3.5. All Participating Individual Ready Reserve Airmen in the Civil Air Patrol United States Air Force and Air Liaison Officer programs are authorized to perform the fitness assessment only once per year.

6.4. Air Reserve Component (ARC) Tenant Support at RegAF Installations.

6.4.1. ARC tenants may utilize host FAC to support official assessments at collocated installations. FACs must coordinate and provide full operational support for ARC tenant units to conduct fitness assessments on Unit Training Assembly weekends, as well as support other ARC Airmen who are available for testing during the week. **(T-2).**

6.4.2. If host FAC cannot provide the appropriate number of staff to fully support weekend ARC testing requirements, FAC may request ARC tenant unit provide PTLs to augment and conduct weekend fitness assessments. If augmentation is required, a ratio of one host FAC member to four ARC augmentees must be maintained during fitness assessments. **(T-2).** Tenant ARC units should provide testing schedule and requirements to the host FAC a minimum of 60 calendar days prior to Unit Training Assembly weekends. FAC must request augmentation support a minimum of 45 calendar days prior to the Unit Training Assembly. **(T-2).**

6.4.3. ARC tenant wings at RegAF bases may conduct their own fitness assessments on Unit Training Assembly weekends contingent upon agreement between Host Installation Commander and ARC Wing Commander. If approved, Fitness program manager will oversee testing. **(T-2).**

6.4.4. All FAC augmentees must have a minimum PTL certification and receive refresher fitness assessment procedures training prior to administering any fitness assessments. **(T-1).**

Chapter 7

SYSTEMS MANAGEMENT

7.1. Air Force Fitness Management System II. AFFMS II is accessible through the AFPC Secure website or AF Portal.

7.1.1. Specific privileges to enter data, view, retrieve and print reports, conduct audits, and correct data entries are granted by FAC staff according to roles and responsibilities for physical fitness program (PFP) data management.

7.1.2. Airmen must submit all requests for specific user privileges must be in writing and sent to the designated office of assignment authority as written in the AFFMS II User Guide, and apply using the appropriate user role or privilege descriptions. The AFFMS guide is the authoritative document for the AFFMS system **(T-1)**.

7.1.3. AFFMS II User Roles. Refer to AFFMS II User Guide available on AFFMS II homepage.

https://www.afpc.af.mil/Portals/70/documents/06_CAREER%20MANAGEMENT/03_Fitness%20Program/AFFMS%20II%20User%20Guide%202019.pdf).

7.2. Physical Fitness Program Case Files. The UFPM will initiate a PFP case file when an Airman scores unsatisfactory on a fitness assessment. **(T-2)**. The case file will contain AF Form 108, hard copy official AF Form 4446 with signatures, retention decision memorandums for record, and AF Form 469s. Upon achievement of first “satisfactory or excellent”, UFPM will move case file from active to inactive status. **(T-2)**. UFPM will maintain (inactive case files until the Airman achieves a sustained “satisfactory or excellent” for 24 consecutive months or the Airman separates or retires, whichever comes first. **(T-2)**.

7.3. Protected Health Information. Fitness assessment, including run and walk times, push-ups, sit-ups, and abdominal circumference component or composite scores do not meet the definition of protected health information as outlined in DoD Manual (DoDM) 6025.18, *Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule in DoD Health Care Programs*.

7.3.1. Medical providers and medical staff must handle information in accordance with DoDM 6025.18 and MTF local procedures that they get from Airman during education, intervention, assessment, or treatment for the PFP. **(T-0)**.

7.3.2. If protected health information must be shared with the Commander, an accounting of the specific information released must occur as outlined in DoDM 6025.18 and in local MTF guidance unless the Airman provides written authorization to disclose the information. **(T-0)**.

Chapter 8

ADMINISTRATIVE AND PERSONNEL ACTIONS

8.1. Adverse Personnel Actions. Airmen are expected to be in compliance with Air Force fitness standards at all times. Airmen with an unsatisfactory fitness assessment render themselves potentially subject to adverse action. Commanders should consult with their servicing Staff Judge Advocate before taking such action.

8.1.1. Prohibited Actions.

8.1.1.1. Commanders shall not impose non judicial punishment (Article 15, Uniform Code of Military Justice) solely for failing to achieve a satisfactory or excellent fitness score. **(T-1).**

8.1.1.2. An Airman shall not be subject to adverse personnel action for inability to take the fitness assessment if the Airman is on a 365-day fitness assessment exemption that has been validated by the MTF Deployment Availability Working Group. **(T-1).**

8.1.2. Authorized Actions.

8.1.2.1. Unit commanders or equivalent will consider adverse administrative action upon an Airman's unsatisfactory fitness score on an official fitness assessment (see [Attachment 7](#)). **(T-2).**

8.1.2.2. If adverse administrative action is not taken in response to an unsatisfactory fitness score on an official fitness assessment, unit commander will document in the Airman's fitness case file the reason no action is being taken. **(T-2).** Absence of commander documentation does not discount the testing failure as a basis in support of administrative discharge action.

8.1.2.3. Commanders may use administrative action to correct an Airman's failure to maintain currency. Unit commanders will document and take corrective action for Airman's unexcused failures to participate in the physical fitness program (PFP) such as failing to accomplish a scheduled fitness assessment, failing to attend a scheduled fitness appointment, or failing to complete mandatory educational intervention. **(T-2).**

8.1.2.4. For standards and requirements relating to performance report documentation of fitness, consult AFI 36-2406, *Officer and Enlisted Evaluation Systems*, and other official guidance specifically addressing performance reports.

8.1.3. Administrative Separation. Refer to AFI 36-3208, AFI 36-3206, *Administrative Discharge Procedures for Commissioned Officers*, for Regular Air Force (RegAF) officers, and AFI 36-3209, *Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members*, for all ARC Airmen.

8.1.3.1. Unit commanders must make a discharge or retention recommendation to the separation authority for enlisted Airmen, show cause authority for officers, or appropriate discharge authority for ARC Airmen once they receive four unsatisfactory fitness assessment scores in a 24 month period and a military medical provider has reviewed the Airman's medical records to rule out medical conditions precluding the Airman from achieving a passing score. If appropriate authority non-concurs with the unit

commander's retention recommendation, discharge action is initiated pursuant to applicable discharge instruction.

8.1.3.2. If an Airman is retained and a subsequent fitness assessment failure re-establishes the basis for discharge (e.g., four failures in 24 months based on most recent failure date), the unit commander must initiate a medical records review and submit another discharge or retention recommendation. **(T-1)**.

8.1.3.2.1. Retention does not prevent previous failures from being included in the most recent 24 month period for fitness assessment failure count.

8.1.3.2.2. Retention decision memorandums will be filed in Airman's PFP case file. **(T-1)**.

8.1.3.3. The 24-month period for discharge or retention recommendation is calculated from the most recent unsatisfactory fitness assessment and is measured in months, not days, including the month of the most recent failure. For example, if the most recent failure is 15 June 2018, then count the failures in the previous 23 months plus the month of the most recent failure (June 2018). In this example, the inclusive months in which fitness assessment failures must be counted are July 2016 through June 2018. Four fitness assessment failures anytime in those 24-months meets the criteria and would require the unit commander to make a discharge or retention recommendation, provided the Airman does not have a medical condition to preclude them from achieving a passing score. Even when an Airman receives one or more multiple passing fitness assessment scores within that 24-month period, the Commander must still make a recommendation for discharge or retention. **(T-1)**.

8.1.3.3.1. Drill status guardsmen have a limited number of duty days to complete their fitness assessment and many Airmen may not have the opportunity to test four times within a 24 month period. Unit commanders must make a discharge or retention recommendation to the appropriate discharge authority for an ANG Title 32 Airman receiving four unsatisfactory fitness assessment scores within a 36 month period. **(T-1)**. A military medical provider must have reviewed the Airman's medical record to rule out medical conditions precluding the Airman from achieving a passing score. **(T-1)**.

8.1.3.3.2. Unit commanders may initiate an enlisted Airman's or recommend an officer's administrative discharge only after the Airman has: received four unsatisfactory fitness assessment scores in a 24 month period (36 months for drill status guardsman); failed to demonstrate improvement (as determined by the commander) despite the reconditioning period; and a MTF medical provider has reviewed the Airman's medical records to rule out medical conditions precluding the Airman from achieving a passing score.

8.2. Fitness Appeals. If an Airman believes the administration of their fitness assessment or their fitness assessment score was in error or unjust, the member may submit an appeal to the installation commander, or equivalent, as described in **Table 8.1** (**Note:** Information pertaining to the wing-level process and procedure and Fitness Assessment Appeals Board supplemental review can be found at: <https://www.afpc.af.mil/Career-Management/Fitness-Program/>). At

installations with multiple wings or tenant organizations, the installation commander may delegate this action to the respective wing commander or equivalent.

Table 8.1. Fitness Assessment Appeals Process.

STEP	ACTION
1	Airman notifies UFPD of potential records error.
2	UFPD collects a Memorandum for Record from the Airman that includes: 1. Requested Action; applicant must identify what action they request to be taken. 2. Basis for request: applicant must be clear what they believe to be an injustice or error. 3. References or supporting documentation. 4. Applicant information to include name, organization/office symbol, unit address, contact phone number, email address, and signature.
3	UFPD routes through chain of command to Wing Commander or equivalent (may be delegable no lower than Squadron Commander or equivalent).
4	If the commander or equivalent (see step 3) approves removal, UFPD or FAC notifies Fitness Information Manager of approved fitness assessment removal or correction. For disapproved requests, the commander or equivalent will provide the Airman with disapproval rationale.
5	For approval, Fitness Information Managers will update the Airman's record.
6	If the Airman wants to appeal the denied request, UFPD or FAC must submit the complete package to Fitness Assessment Appeals Board at AFPC/DP2SSM at afpc.dp2ssm.specialprograms@us.af.mil . If needed, the Air Force Board for Correction of Military Records will be the final decision authority. Required documents are: 1. Disapproval memorandum from the Airman signed by the wing commander, or equivalent (should include reason for disapproval). 2. FSQ. 3. The completed and signed fitness assessment score sheet.

8.3. Correcting Administrative Errors on Fitness Assessment Scores in AFFMS

II. Administrative errors are limited to: number of repetitions performed does not match number submitted in AFFMS II; corrections to profile dates and exemption updates; deletion of score double entry; and fitness assessment taken while pregnant. FAC will submit requests for administrative corrections to their installation Fitness Information Manager. In cases where a FAC does not exist, the administering PTL, UFPD, or Airman may submit the request directly to the Fitness Information Manager. Requests for administrative correction must include the appropriate documentation (i.e., score sheet and or AF Form 469) for verification purposes.

JOHN A. FEDRIGO

Performing the Duties of the Assistant Secretary of
the Air Force
Manpower and Reserve Affairs

Attachment 1**GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

DoDI 1308.3, *DoD Physical Fitness and Body Fat Programs Procedures*, 5 November 2002

DoDM 6025.18, *Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule in DoD Health Care Programs*, 13 March 2019

AFI 10-203, *Duty Limiting Conditions*, 20 November 2014

AFI 33-322, *Records Management and Information Governance Program*, 23 March 2020

AFI 33-332, *Air Force Privacy and Civil Liberties Program*, 10 March 2020

AFI 34-266, *Fitness, Sports, and World Class Athletes Program*, 25 September 2018

AFI 36-2406, *Officer and Enlisted Evaluation Systems*, 14 November 2019

AFI 36-2501, *Officer Promotions and Selective Continuation*, 16 June 2004

AFI 36-2903, *Dress and Personal Appearance of Air Force Personnel*, 7 February 2020

AFI 36-3206, *Administrative Discharge Procedures for Commissioned Officers*, 9 June 2004

AFI 36-3208, *Administrative Separation of Airmen*, 9 July 2004

AFI 36-3209, *Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members*, 14 April 2005

AFI 44-102, *Medical Care Management*, 17 March 2015

AFI 48-103, *Health Promotion*, 21 June 2019

AFI 48-123, *Medical Examinations and Standards*, 5 November 2013

AFMAN 41-210, *Tricare Operations and Patient Administration*, 10 September 2019

AFFMS II User Guide

DAFI 33-360, *Publications and Forms Management*, 1 December 2015

EO 13478, *Amendments to Executive Order 9397 Relating to Federal Agency Use of Social Security Numbers*

Technical Order 33K-1-100-1, *Calibration Procedure for Maintenance Data Collection Codes and Calibration Measurement Summaries*, 30 November 2015

Prescribed Forms

AF Form 108, *Physical Fitness Education and Intervention Processing*

AF Form 4446, *Air Force Fitness Assessment Scorecard*

AF Form 4446A, *Air Force Physical Fitness Screening Questionnaire (FSQ)*

Adopted Forms

AF Form 418, *Selective Reenlistment Program Consideration*

AF Form 422, *Notification of Air Force Member's Qualification Status*

AF Form 469, *Duty Limiting Condition Report*

AF Form 847, *Recommendation for Change of Publication*

DD Form 2875, *System Authorization Access Request*

Abbreviations and Acronyms

AED—Automated external defibrillator

AF—Air Force

AFFMS II—Air Force Fitness Management System II

AFI—Air Force Instruction

AFMAN—Air Force Manual

AFRC—Air Force Reserve Command

AFPC—Air Force Personnel Center

AFPD—Air Force Policy Directive

AFR—Air Force Reserve

AGR—Active Guard/Reserve

ANG—Air National Guard

ARC—Air Reserve Component

CES—Civil Engineer Squadron

DoD—Department of Defense

DoDI—Department of Defense Instruction

DoDM—Department of Defense Manual

EO—Executive Order

FAC—Fitness Assessment Cell

FIP—Fitness Improvement Program

FSQ—Air Force Physical Fitness Screening Questionnaire

FSS—Force Support Squadron

MAJCOM—Major Command

MTF—Military Treatment Facility

PCS—Permanent change of station

PFA—Physical Fitness Assessment

PFP—Physical Fitness Program

PTL—Physical Training Leader

RegAF—Regular Air Force

RNLTD—Report Not Later Than Date

TDY—Temporary duty assignment

UFPM—Unit Fitness Program Manager

Terms

Air Reserve Component—Component consisting of all ANG and AF Reserve personnel.

Automated External Defibrillator—A device approved by the Federal Drug Administration for the purpose of administering an electric shock of preset voltage to the heart through the chest wall in an attempt to restore the normal rhythm of the heart during a life-threatening arrhythmia.

Basic Life Support Training—Includes Cardio Pulmonary Resuscitation and Automated External Defibrillator certification.

Chronic Medical Condition—A medical condition that active medical treatment cannot cure or control. Chronic conditions may involve periodic acute episodes and may require intermittent inpatient care. Sometimes medical treatment may control a chronic medical condition sufficiently to permit continuation of daily living activities such as work, or school. (Defined in AFMAN 41-210)

Current—Currency is established based on completion date and fitness level of last assessment. Airmen go non-current when they haven't tested within that timeframe. **Note:** Being "current" does not necessarily constitute meeting standards.

Diagnostic Physical Fitness Assessment—An unofficial physical fitness assessment conducted under official conditions.

Fitness Assessment Cell—Operated in the Fitness and Sports Section as part of the Sustainment Services Flight within the FSS.

High—Risk – Airmen who have not been exercising regularly and or have other risk factors for heart attack (increasing age, smoking, diabetes, high blood pressure) are at increased risk of injury or death during the test. **Note:** This information is annotated on the FSQ.

Military Training Leader—Counsels Airmen attending basic military training or technical school training on personal problems, military bearing, standards, and behavior; and schedules and conducts military training functions for students. This is a special duty assignment and individuals in this position hold the 8B100 AF Specialty Code.

Personal Care Provider—For RegAF, the individual's primary medical care manager. In most cases, a military practitioner.

Prior Service Personnel—An applicant who has served 84 calendar days or more of Active Duty or Initial Active Duty Training with the US Armed Services, and such service included completion of a recognized Basic Military Training course.

Qualified Duty Status—The period in which an RC Service member is: On Active Duty (AD) or full-time National Guard duty (FTNGD) for more than 30 calendar days; Performing AD or FTNGD for 30 calendar days or less; Performing IDT; Performing funeral honors duty (FHD); Traveling to or from the place where he or she is to perform or has performed AD or FTNGD as

provided in this definition, IDT, or FHD; Remaining overnight immediately before the commencement of, or between successive periods of IDT at or in the vicinity of the site of the IDT; or Remaining overnight immediately before serving on FHD, at or in the vicinity of the place where the Reserve Component Service member was to so serve, if the place is outside reasonable commuting distance from his or her residence.

Self-paced Fitness Improvement Program (FIP) - A remedial intervention program recommended for non-AGR ARC Airmen identified with a composite unsatisfactory fitness score.

Special Warfare Airmen—Formally known as Battlefield Airmen. The Special Warfare Training Wing was activated October 2018 and assumed command of the Battlefield Airman Training Group. They were recently re-designated as the Special Warfare Training Group. Special Warfare Airmen are: pararescue, combat control, tactical air control party officer and tactical air control party, special operations weather team, combat rescue officer and special tactics officer.

Tier 1 Physical Fitness Assessment—Fitness test that indicates health and general fitness for total force consisting of the following components: push-ups; sit-ups; waist measurement; and 1.5 mile run.

Tier 2 Physical Fitness Assessment—Performance based fitness test that are occupationally-specific, operationally-relevant and independent of age and gender.

Title 10 (Federal Status)—Includes RegAF Airmen, ANG Statutory Tour, AFR AGRs, AFR Air Reserve Technicians, Individual Mobilization Augmentees, Traditional Reservists, and Airmen of the Individual Ready Reserve.

Title 32 (State Status)—Includes ANG Technicians, ANG Drill Status Guardsmen, and ANG permanent AGRs serving at the state level. Includes Airmen performing active or inactive duty outside of the National Guard Bureau's statutory tour program (i.e. Active Duty for Operational Support, AGR, Annual Tour, Inactive Duty Training, Military Personnel Appropriation).

Title 32 Active Guard Reserve (AGR)—Air Reserve Component (ARC) Airmen on AGR duty to support the National Guard and Reserve, who are paid from the Reserve Personnel Appropriations of a military department. This includes all personnel of the National Guard and Reserve Forces serving on active duty under Title 10 United States Code Sections 10301, 10211, 12301(d), 12310, 10502, 10505 and 10506, 10305, or 12402; or Title 32 United States Code Section 502(f) in order to organize, administer, recruit, instruct, or train Airmen of the Reserve components.

Title 32 Drill Status Guardsman (DSG)—Airmen who participate in Unit Training Assembly, traditionally one weekend per month and a two-week annual training period. Also known as Traditional Guardsman. It includes Dual Status Technicians. For the purpose of this manual, this includes Airmen serving on Active Duty for Operational Support orders.

Wet Bulb Globe Temperature—A composite temperature used to estimate the effect of temperature, humidity, wind speed and solar radiation on humans. Industrial hygienists and athletes have used it to determine appropriate exposure levels to high temperatures.

Attachment 2

FITNESS ASSESSMENT CHARTS

Figure A2.1. Fitness Assessment Chart (Male – Age < 30).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 9:12	Low-Risk	60.0	≤ 32.5	Low-Risk	20.0	≥ 67	10.0	≥ 58	10.0
9:13 - 9:34	Low-Risk	59.7	33.0	Low-Risk	20.0	62	9.5	55	9.5
9:35 - 9:45	Low-Risk	59.3	33.5	Low-Risk	20.0	61	9.4	54	9.4
9:46 - 9:58	Low-Risk	58.9	34.0	Low-Risk	20.0	60	9.3	53	9.2
9:59 - 10:10	Low-Risk	58.5	34.5	Low-Risk	20.0	59	9.2	52	9.0
10:11 - 10:23	Low-Risk	57.9	35.0	Low-Risk	20.0	58	9.1	51	8.8
10:24 - 10:37	Low-Risk	57.3	35.5	Moderate Risk	17.6	57	9.0	50	8.7
10:38 - 10:51	Low-Risk	56.6	36.0	Moderate Risk	17.0	56	8.9	49	8.5
10:52 - 11:06	Low-Risk	55.7	36.5	Moderate Risk	16.4	55	8.8	48	8.3
11:07 - 11:22	Low-Risk	54.8	37.0	Moderate Risk	15.8	54	8.8	47	8.0
11:23 - 11:38	Low-Risk	53.7	37.5 #	Moderate Risk	15.1	53	8.7	46 #	7.5
11:39 - 11:56	Low-Risk	52.4	38.0	Moderate Risk	14.4	52	8.6	45	7.0
11:57 - 12:14	Low-Risk	50.9	38.5	Moderate Risk	13.5	51	8.5	44	6.5
12:15 - 12:33	Low-Risk	49.2	39.0 *	Moderate Risk	12.6	50	8.4	43	6.3
12:34 - 12:53	Moderate Risk	47.2	39.5	High Risk	0	49	8.3	42 *	6.0
12:54 - 13:14 #	Moderate Risk	44.9	40.0	High Risk	0	48	8.1	41	0
13:15 - 13:36 *	Moderate Risk	42.3	40.5	High Risk	0	47	8.0	40	0
13:37 - 14:00	High Risk	0	41.0	High Risk	0	46	7.8	39	0
14:01 - 14:25	High Risk	0	41.5	High Risk	0	45	7.7	38	0
14:26 - 14:52	High Risk	0	42.0	High Risk	0	44 #	7.5	37	0
14:53 - 15:20	High Risk	0	42.5	High Risk	0	43	7.3	36	0
15:21 - 15:50	High Risk	0	43.0	High Risk	0	42	7.2	35	0
15:51 - 16:22	High Risk	0	≥ 43.5	High Risk	0	41	7.0	34	0
16:23 - 16:57	High Risk	0				40	6.8	33	0
≥ 16:58	High Risk	0				39	6.5	32	0
						38	6.3	31	0
						37	6.0	30	0
						36	5.8	≤ 29	0
						35	5.5		
						34	5.3		
						33 *	5.0		
						32	0		
						31	0		
						30	0		
						29	0		
						28	0		
						27	0		
						26	0		
						25	0		
						24	0		
						23	0		
						22	0		
						21	0		
						20	0		
						19	0		
						18	0		
						≤ 17	0		

NOTES:
Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems

Passing Requirements - member *must*: 1) meet minimum value in each of the four components, *and* 2) achieve a composite point total ≥ 75 points

* Minimum Component Values
Run time ≤ 13:36 mins:secs / Abd Circ ≤ 39.0 inches
Push-ups ≥ 33 repetitions/one minute / Sit-ups ≥ 42 repetitions/one minute

Target Component Values
Member should attain or surpass these to achieve ≥ 75.0 composite score

Composite Score Categories
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0

Figure A2.2. Fitness Assessment Chart (Male – Age 30 - 39).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 9:34	Low-Risk	60.0	≤ 32.5	Low-Risk	20.0	≥ 57	10.0	≥ 54	10.0
9:35 - 9:58	Low-Risk	59.3	33.0	Low-Risk	20.0	52	9.5	51	9.5
9:59 - 10:10	Low-Risk	58.6	33.5	Low-Risk	20.0	51	9.4	50	9.4
10:11 - 10:23	Low-Risk	57.9	34.0	Low-Risk	20.0	50	9.3	49	9.2
10:24 - 10:37	Low-Risk	57.3	34.5	Low-Risk	20.0	49	9.2	48	9.0
10:38 - 10:51	Low-Risk	56.6	35.0	Low-Risk	20.0	48	9.2	47	8.8
10:52 - 11:06	Low-Risk	55.7	35.5	Moderate Risk	17.6	47	9.1	46	8.7
11:07 - 11:22	Low-Risk	54.8	36.0	Moderate Risk	17.0	46	9.0	45	8.5
11:23 - 11:38	Low-Risk	53.7	36.5	Moderate Risk	16.4	45	8.9	44	8.3
11:39 - 11:56	Low-Risk	52.4	37.0	Moderate Risk	15.8	44	8.8	43	8.0
11:57 - 12:14	Low-Risk	50.9	37.5 #	Moderate Risk	15.1	43	8.7	42 #	7.5
12:15 - 12:33	Low-Risk	49.2	38.0	Moderate Risk	14.4	42	8.6	41	7.0
12:34 - 12:53	Low-Risk	47.2	38.5	Moderate Risk	13.5	41	8.5	40	6.5
12:54 - 13:14 #	Moderate Risk	44.9	39.0 *	Moderate Risk	12.6	40	8.3	39 *	6.0
13:15 - 13:36	Moderate Risk	42.3	39.5	High Risk	0	39	8.0	38	0
13:37 - 14:00 *	Moderate Risk	39.3	40.0	High Risk	0	38	7.8	37	0
14:01 - 14:25	High Risk	0	40.5	High Risk	0	37	7.7	36	0
14:26 - 14:52	High Risk	0	41.0	High Risk	0	36 #	7.5	35	0
14:53 - 15:20	High Risk	0	41.5	High Risk	0	35	7.3	34	0
15:21 - 15:50	High Risk	0	42.0	High Risk	0	34	7.0	33	0
15:51 - 16:22	High Risk	0	42.5	High Risk	0	33	6.8	32	0
16:23 - 16:57	High Risk	0	43.0	High Risk	0	32	6.7	31	0
≥ 16:58	High Risk	0	≥ 43.5	High Risk	0	31	6.5	30	0
						30	6.0	29	0
NOTES:						29	5.5	28	0
Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems						28	5.3	27	0
Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points						27 *	5.0	26	0
						26	0	≤ 25	0
						25	0		
						24	0		
						23	0		
<u>* Minimum Component Values</u>						22	0		
Run time ≤ 14:00 mins:secs / Abd Circ ≤ 39.0 inches						21	0		
Push-ups ≥ 27 repetitions/one minute / Sit-ups ≥ 39 repetitions/one minute						20	0		
						19	0		
<u># Target Component Values</u>						18	0		
Member should attain or surpass these to achieve ≥ 75.0 composite score						17	0		
						16	0		
Composite Score Categories						15	0		
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0						14	0		
						13	0		
						≤ 12	0		

Figure A2.3. Fitness Assessment Chart (Male – Age 40 - 49).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 9:45	Low-Risk	60.0	≤ 32.5	Low-Risk	20.0	≥ 44	10.0	≥ 50	10.0
9:46 - 10:10	Low-Risk	59.8	33.0	Low-Risk	20.0	40	9.5	47	9.5
10:11 - 10:23	Low-Risk	59.5	33.5	Low-Risk	20.0	39	9.4	46	9.4
10:24 - 10:37	Low-Risk	59.1	34.0	Low-Risk	20.0	38	9.2	45	9.2
10:38 - 10:51	Low-Risk	58.7	34.5	Low-Risk	20.0	37	9.1	44	9.1
10:52 - 11:06	Low-Risk	58.3	35.0	Low-Risk	20.0	36	9.0	43	9.0
11:07 - 11:22	Low-Risk	57.7	35.5	Moderate Risk	17.6	35	8.8	42	8.8
11:23 - 11:38	Low-Risk	57.1	36.0	Moderate Risk	17.0	34	8.5	41	8.7
11:39 - 11:56	Low-Risk	56.3	36.5	Moderate Risk	16.4	33	8.4	40	8.5
11:57 - 12:14	Low-Risk	55.4	37.0	Moderate Risk	15.8	32	8.3	39	8.0
12:15 - 12:33	Low-Risk	54.3	37.5 #	Moderate Risk	15.1	31	8.1	38	7.8
12:34 - 12:53	Low-Risk	53.1	38.0	Moderate Risk	14.4	30	8.0	37 #	7.5
12:54 - 13:14	Low-Risk	51.5	38.5	Moderate Risk	13.5	29 #	7.5	36	7.0
13:15 - 13:36	Low-Risk	49.8	39.0 *	Moderate Risk	12.6	28	7.3	35	6.5
13:37 - 14:00	Moderate Risk	47.7	39.5	High Risk	0	27	7.2	34 *	6.0
14:01 - 14:25 #	Moderate Risk	45.2	40.0	High Risk	0	26	7.0	33	0
14:26 - 14:52 *	Moderate Risk	42.3	40.5	High Risk	0	25	6.5	32	0
14:53 - 15:20	High Risk	0	41.0	High Risk	0	24	6.0	31	0
15:21 - 15:50	High Risk	0	41.5	High Risk	0	23	5.8	30	0
15:51 - 16:22	High Risk	0	42.0	High Risk	0	22	5.5	29	0
16:23 - 16:57	High Risk	0	42.5	High Risk	0	21 *	5.0	28	0
16:58 - 17:34	High Risk	0	43.0	High Risk	0	20	0	27	0
17:35 - 18:14	High Risk	0	≥ 43.5	High Risk	0	19	0	26	0
≥ 18:15	High Risk	0				18	0	25	0
						17	0	24	0
						16	0	23	0
						15	0	22	0
						14	0	≤ 21	0
						13	0		
						12	0		
						11	0		
						10	0		
						9	0		
						≤ 8	0		
NOTES:									
Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems									
Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points									
* Minimum Component Values									
Run time ≤ 14:52 mins:secs / Abd Circ ≤ 39.0 inches									
Push-ups ≥ 21 repetitions/one minute / Sit-ups ≥ 34 repetitions/one minute									
# Target Component Values									
Member should attain or surpass these to achieve ≥ 75.0 composite score									
Composite Score Categories									
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0									

Figure A2.4. Fitness Assessment Chart (Male – Age 50 - 59).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 10:37	Low-Risk	60.0	≤ 32.5	Low-Risk	20.0	≥ 44	10.0	≥ 46	10.0
10:38 - 11:06	Low-Risk	59.7	33.0	Low-Risk	20.0	39	9.5	43	9.5
11:07 - 11:22	Low-Risk	59.4	33.5	Low-Risk	20.0	38	9.4	42	9.4
11:23 - 11:38	Low-Risk	59.0	34.0	Low-Risk	20.0	37	9.4	41	9.2
11:39 - 11:56	Low-Risk	58.5	34.5	Low-Risk	20.0	36	9.3	40	9.1
11:57 - 12:14	Low-Risk	58.0	35.0	Low-Risk	20.0	35	9.3	39	9.0
12:15 - 12:33	Low-Risk	57.3	35.5	Moderate Risk	17.6	34	9.2	38	8.8
12:34 - 12:53	Low-Risk	56.5	36.0	Moderate Risk	17.0	33	9.2	37	8.7
12:54 - 13:14	Low-Risk	55.6	36.5	Moderate Risk	16.4	32	9.1	36	8.5
13:15 - 13:36	Low-Risk	54.5	37.0	Moderate Risk	15.8	31	9.1	35	8.0
13:37 - 14:00	Low-Risk	53.3	37.5 #	Moderate Risk	15.1	30	9.0	34	7.8
14:01 - 14:25	Low-Risk	51.8	38.0	Moderate Risk	14.4	29	8.8	33 #	7.5
14:26 - 14:52	Low-Risk	50.0	38.5	Moderate Risk	13.5	28	8.5	32	7.3
14:53 - 15:20	Moderate Risk	47.9	39.0 *	Moderate Risk	12.6	27	8.3	31	7.0
15:21 - 15:50 #	Moderate Risk	45.4	39.5	High Risk	0	26	8.2	30	6.5
15:51 - 16:22 *	Moderate Risk	42.4	40.0	High Risk	0	25	8.0	29	6.3
16:23 - 16:57	High Risk	0	40.5	High Risk	0	24 #	7.5	28 *	6.0
16:58 - 17:34	High Risk	0	41.0	High Risk	0	23	7.3	27	0
17:35 - 18:14	High Risk	0	41.5	High Risk	0	22	7.2	26	0
18:15 - 18:56	High Risk	0	42.0	High Risk	0	21	7.0	25	0
18:57 - 19:43	High Risk	0	42.5	High Risk	0	20	6.5	24	0
19:44 - 20:33	High Risk	0	43.0	High Risk	0	19	6.0	23	0
≥ 20:34	High Risk	0	≥ 43.5	High Risk	0	18	5.8	22	0
NOTES: Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points * Minimum Component Values Run time ≤ 16:22 mins:secs / Abd Circ ≤ 39.0 inches Push-ups ≥ 15 repetitions/one minute / Sit-ups ≥ 28 repetitions/one minute # Target Component Values Member should attain or surpass these to achieve ≥ 75.0 composite score Composite Score Categories Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0						17	5.5	21	0
						16	5.3	20	0
						15 *	5.0	19	0
						14	0	18	0
						13	0	17	0
						12	0	16	0
						11	0	15	0
						10	0	≤ 14	0
						9	0		
						8	0		
						7	0		
						6	0		
						≤ 5	0		

Figure A2.5. Fitness Assessment Chart (Male – Age 60 and greater).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 11:22	Low-Risk	60.0	≤ 32.5	Low-Risk	20.0	≥ 30	10.0	≥ 42	10.0
11:23 - 11:56	Low-Risk	59.7	33.0	Low-Risk	20.0	28	9.5	39	9.5
11:57 - 12:14	Low-Risk	59.4	33.5	Low-Risk	20.0	27	9.3	38	9.4
12:15 - 12:33	Low-Risk	59.0	34.0	Low-Risk	20.0	26	9.0	37	9.2
12:34 - 12:53	Low-Risk	58.5	34.5	Low-Risk	20.0	25	8.8	36	9.1
12:54 - 13:14	Low-Risk	58.0	35.0	Low-Risk	20.0	24	8.5	35	9.0
13:15 - 13:36	Low-Risk	57.3	35.5	Moderate Risk	17.6	23	8.0	34	8.9
13:37 - 14:00	Low-Risk	56.5	36.0	Moderate Risk	17.0	22 #	7.5	33	8.8
14:01 - 14:25	Low-Risk	55.6	36.5	Moderate Risk	16.4	21	7.0	32	8.6
14:26 - 14:52	Low-Risk	54.5	37.0	Moderate Risk	15.8	20	6.5	31	8.5
14:53 - 15:20	Low-Risk	53.3	37.5 #	Moderate Risk	15.1	19	6.3	30	8.0
15:21 - 15:50	Low-Risk	51.8	38.0	Moderate Risk	14.4	18	6.0	29	7.8
15:51 - 16:22	Low-Risk	50.0	38.5	Moderate Risk	13.5	17	5.8	28 #	7.5
16:23 - 16:57	Moderate Risk	47.9	39.0 *	Moderate Risk	12.6	16	5.5	27	7.3
16:58 - 17:34 #	Moderate Risk	45.4	39.5	High Risk	0	15	5.3	26	7.0
17:35 - 18:14 *	Moderate Risk	42.4	40.0	High Risk	0	14 *	5.0	25	6.8
18:15 - 18:56	High Risk	0	40.5	High Risk	0	13	0	24	6.5
18:57 - 19:43	High Risk	0	41.0	High Risk	0	12	0	23	6.3
19:44 - 20:33	High Risk	0	41.5	High Risk	0	11	0	22 *	6.0
20:34 - 21:28	High Risk	0	42.0	High Risk	0	10	0	21	0
21:29 - 22:28	High Risk	0	42.5	High Risk	0	9	0	20	0
22:29 - 23:34	High Risk	0	43.0	High Risk	0	8	0	19	0
≥ 23:35	High Risk	0	≥ 43.5	High Risk	0	7	0	18	0
						6	0	17	0
						5	0	16	0
NOTES:						4	0	15	0
Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems						≤ 3	0	14	0
Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points								13	0
								12	0
								11	0
								10	0
								≤ 9	0
<u>* Minimum Component Values</u>									
Run time ≤ 18:14 mins:secs / Abd Circ ≤ 39.0 inches									
Push-ups ≥ 14 repetitions/one minute / Sit-ups ≥ 22 repetitions/one minute									
<u># Target Component Values</u>									
Member should attain or surpass these to achieve ≥ 75.0 composite score									
Composite Score Categories									
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0									

Figure A2.6. Fitness Assessment Chart (Female – Age < 30).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 10:23	Low-Risk	60.0	≤ 29.0	Low Risk	20.0	≥ 47	10.0	≥ 54	10.0
10:24 - 10:51	Low-Risk	59.9	29.5	Low Risk	20.0	42	9.5	51	9.5
10:52 - 11:06	Low-Risk	59.5	30.0	Low Risk	20.0	41	9.4	50	9.4
11:07 - 11:22	Low-Risk	59.2	30.5	Low Risk	20.0	40	9.3	49	9.0
11:23 - 11:38	Low-Risk	58.9	31.0	Low Risk	20.0	39	9.2	48	8.9
11:39 - 11:56	Low-Risk	58.6	31.5	Low Risk	20.0	38	9.1	47	8.8
11:57 - 12:14	Low-Risk	58.1	32.0	Moderate Risk	17.6	37	9.0	46	8.6
12:15 - 12:33	Low-Risk	57.6	32.5	Moderate Risk	17.1	36	8.9	45	8.5
12:34 - 12:53	Low-Risk	57.0	33.0	Moderate Risk	16.5	35	8.8	44	8.0
12:54 - 13:14	Low-Risk	56.2	33.5	Moderate Risk	15.9	34	8.6	43	7.8
13:15 - 13:36	Low-Risk	55.3	34.0 #	Moderate Risk	15.2	33	8.5	42 #	7.5
13:37 - 14:00	Low-Risk	54.2	34.5	Moderate Risk	14.5	32	8.4	41	7.0
14:01 - 14:25	Low-Risk	52.8	35.0	Moderate Risk	13.7	31	8.3	40	6.8
14:26 - 14:52	Low-Risk	51.2	35.5 *	Moderate Risk	12.8	30	8.2	39	6.5
14:53 - 15:20	Moderate Risk	49.3	36.0	High Risk	0	29	8.1	38 *	6.0
15:21 - 15:50 #	Moderate Risk	46.9	36.5	High Risk	0	28	8.0	37	0
15:51 - 16:22 *	Moderate Risk	44.1	37.0	High Risk	0	27 #	7.5	36	0
16:23 - 16:57	High Risk	0	37.5	High Risk	0	26	7.3	35	0
16:58 - 17:34	High Risk	0	38.0	High Risk	0	25	7.2	34	0
17:35 - 18:14	High Risk	0	38.5	High Risk	0	24	7.0	33	0
18:15 - 18:56	High Risk	0	39.0	High Risk	0	23	6.5	32	0
18:57 - 19:43	High Risk	0	39.5	High Risk	0	22	6.3	31	0
19:44 - 20:33	High Risk	0	≥ 40.0	High Risk	0	21	6.0	30	0
≥ 20:34	High Risk	0				20	5.8	29	0
						19	5.5	28	0
						18 *	5.0	27	0
NOTES:						17	0	26	0
Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems						16	0	25	0
Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points						15	0	24	0
* Minimum Component Values						14	0	23	0
Run time ≤ 16:22 mins:secs / Abd Circ ≤ 35.5 inches						13	0	≤ 22	0
Push-ups ≥ 18 repetitions/one minute / Sit-ups ≥ 38 repetitions/one minute						12	0		
# Target Component Values						11	0		
Member should attain or surpass these to achieve ≥ 75.0 composite score						10	0		
Composite Score Categories						9	0		
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0						8	0		
						≤ 7	0		

Figure A2.7. Fitness Assessment Chart (Female – Age 30 - 39).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 10:51	Low-Risk	60.0	≤ 29.0	Low Risk	20.0	≥ 46	10.0	≥ 45	10.0
10:52 - 11:22	Low-Risk	59.5	29.5	Low Risk	20.0	40	9.5	42	9.5
11:23 - 11:38	Low-Risk	59.0	30.0	Low Risk	20.0	39	9.4	41	9.4
11:39 - 11:56	Low-Risk	58.6	30.5	Low Risk	20.0	38	9.3	40	9.0
11:57 - 12:14	Low-Risk	58.1	31.0	Low Risk	20.0	37	9.3	39	8.8
12:15 - 12:33	Low-Risk	57.6	31.5	Low Risk	20.0	36	9.2	38	8.5
12:34 - 12:53	Low-Risk	57.0	32.0	Moderate Risk	17.6	35	9.1	37	8.3
12:54 - 13:14	Low-Risk	56.2	32.5	Moderate Risk	17.1	34	9.1	36	8.2
13:15 - 13:36	Low-Risk	55.3	33.0	Moderate Risk	16.5	33	9.0	35	8.0
13:37 - 14:00	Low-Risk	54.2	33.5	Moderate Risk	15.9	32	8.9	34	7.8
14:01 - 14:25	Low-Risk	52.8	34.0 #	Moderate Risk	15.2	31	8.9	33 #	7.5
14:26 - 14:52	Low-Risk	51.2	34.5	Moderate Risk	14.5	30	8.8	32	7.0
14:53 - 15:20	Low-Risk	49.3	35.0	Moderate Risk	13.7	29	8.7	31	6.8
15:21 - 15:50 #	Moderate Risk	46.9	35.5 *	Moderate Risk	12.8	28	8.6	30	6.5
15:51 - 16:22	Moderate Risk	44.1	36.0	High Risk	0	27	8.6	29 *	6.0
16:23 - 16:57 *	Moderate Risk	40.8	36.5	High Risk	0	26	8.5	28	0
16:58 - 17:34	High Risk	0	37.0	High Risk	0	25	8.3	27	0
17:35 - 18:14	High Risk	0	37.5	High Risk	0	24	8.2	26	0
18:15 - 18:56	High Risk	0	38.0	High Risk	0	23	8.0	25	0
18:57 - 19:43	High Risk	0	38.5	High Risk	0	22	7.9	24	0
19:44 - 20:33	High Risk	0	39.0	High Risk	0	21	7.8	23	0
≥ 20:34	High Risk	0	39.5	High Risk	0	20	7.6	22	0
			≥ 40.0	High Risk	0	19 #	7.5	21	0
						18	7.0	20	0
						17	6.8	19	0
NOTES: Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems						16	6.5	18	0
						15	6.0	17	0
						14 *	5.0	16	0
						13	0	15	0
Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points						12	0	≤ 14	0
						11	0		
* Minimum Component Values						10	0		
						9	0		
Run time ≤ 16:57 mins:secs / Abd Circ ≤ 35.5 inches						8	0		
						7	0		
Push-ups ≥ 14 repetitions/one minute / Sit-ups ≥ 29 repetitions/one minute						6	0		
						5	0		
# Target Component Values									
Member should attain or surpass these to achieve ≥ 75.0 composite score									
Composite Score Categories									
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0									

Figure A2.8. Fitness Assessment Chart (Female – Age 40 - 49).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 11:22	Low-Risk	60.0	≤ 29.0	Low Risk	20.0	≥ 38	10.0	≥ 41	10.0
11:23 - 11:56	Low-Risk	59.9	29.5	Low Risk	20.0	33	9.5	38	9.5
11:57 - 12:14	Low-Risk	59.8	30.0	Low Risk	20.0	32	9.4	37	9.4
12:15 - 12:33	Low-Risk	59.6	30.5	Low Risk	20.0	31	9.2	36	9.2
12:34 - 12:53	Low-Risk	59.4	31.0	Low Risk	20.0	30	9.1	35	9.1
12:54 - 13:14	Low-Risk	59.1	31.5	Low Risk	20.0	29	9.0	34	9.0
13:15 - 13:36	Low-Risk	58.7	32.0	Moderate Risk	17.6	28	8.9	33	8.8
13:37 - 14:00	Low-Risk	58.2	32.5	Moderate Risk	17.1	27	8.8	32	8.5
14:01 - 14:25	Low-Risk	57.7	33.0	Moderate Risk	16.5	26	8.7	31	8.3
14:26 - 14:52	Low-Risk	56.9	33.5	Moderate Risk	15.9	25	8.6	30	8.2
14:53 - 15:20	Low-Risk	56.0	34.0 #	Moderate Risk	15.2	24	8.6	29	8.0
15:21 - 15:50	Low-Risk	54.8	34.5	Moderate Risk	14.5	23	8.5	28 #	7.5
15:51 - 16:22	Low-Risk	53.3	35.0	Moderate Risk	13.7	22	8.4	27	7.0
16:23 - 16:57	Moderate Risk	51.4	35.5 *	Moderate Risk	12.8	21	8.3	26	6.8
16:58 - 17:34	Moderate Risk	49.0	36.0	High Risk	0	20	8.2	25	6.4
17:35 - 18:14 **	Moderate Risk	45.9	36.5	High Risk	0	19	8.1	24 *	6.0
18:15 - 18:56	High Risk	0	37.0	High Risk	0	18	8.0	23	0
18:57 - 19:43	High Risk	0	37.5	High Risk	0	17	7.8	22	0
19:44 - 20:33	High Risk	0	38.0	High Risk	0	16 #	7.5	21	0
20:34 - 21:28	High Risk	0	38.5	High Risk	0	15	7.0	20	0
21:29 - 22:28	High Risk	0	39.0	High Risk	0	14	6.5	19	0
≥ 22:29	High Risk	0	39.5	High Risk	0	13	6.0	18	0
			≥ 40.0	High Risk	0	12	5.5	17	0
						11 *	5.0	16	0
NOTES:						10	0	15	0
Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems						9	0	14	0
Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points						8	0	13	0
						7	0	12	0
						6	0	11	0
						5	0	10	0
						4	0	≤ 9	0
* Minimum Component Values						≤ 3	0		
Run time ≤ 18:14 mins:secs / Abd Circ ≤ 35.5 inches									
Push-ups ≥ 11 repetitions/one minute / Sit-ups ≥ 24 repetitions/one minute									
# Target Component Values									
Member should attain or surpass these to achieve ≥ 75.0 composite score									
Composite Score Categories									
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0									

Figure A2.9. Fitness Assessment Chart (Female – Age 50 - 59).

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 12:53	Low-Risk	60.0	≤ 29.0	Low Risk	20.0	≥ 35	10.0	≥ 32	10.0
12:54 - 13:36	Low-Risk	59.8	29.5	Low Risk	20.0	30	9.5	30	9.5
13:37 - 14:00	Low-Risk	59.6	30.0	Low Risk	20.0	29	9.4	29	9.0
14:01 - 14:25	Low-Risk	59.3	30.5	Low Risk	20.0	28	9.3	28	8.9
14:26 - 14:52	Low-Risk	58.9	31.0	Low Risk	20.0	27	9.2	27	8.8
14:53 - 15:20	Low-Risk	58.4	31.5	Low Risk	20.0	26	9.1	26	8.6
15:21 - 15:50	Low-Risk	57.7	32.0	Moderate Risk	17.6	25	9.0	25	8.5
15:51 - 16:22	Low-Risk	56.8	32.5	Moderate Risk	17.1	24	8.8	24	8.0
16:23 - 16:57	Low-Risk	55.6	33.0	Moderate Risk	16.5	23	8.7	23 #	7.5
16:58 - 17:34	Low-Risk	54.0	33.5	Moderate Risk	15.9	22	8.6	22	7.0
17:35 - 18:14	Low-Risk	51.9	34.0 #	Moderate Risk	15.2	21	8.6	21	6.5
18:15 - 18:56	Moderate Risk	49.2	34.5	Moderate Risk	14.5	20	8.5	20 *	6.0
18:57 - 19:43 *#	Moderate Risk	45.5	35.0	Moderate Risk	13.7	19	8.4	19	0
19:44 - 20:33	High Risk	0	35.5 *	Moderate Risk	12.8	18	8.3	18	0
20:34 - 21:28	High Risk	0	36.0	High Risk	0	17	8.2	17	0
21:29 - 22:28	High Risk	0	36.5	High Risk	0	16	8.1	16	0
22:29 - 23:34	High Risk	0	37.0	High Risk	0	15	8.0	15	0
≥ 23:35	High Risk	0	37.5	High Risk	0	14 #	7.5	14	0
			38.0	High Risk	0	13	7.0	13	0
			38.5	High Risk	0	12	6.5	12	0
			39.0	High Risk	0	11	6.0	11	0
			39.5	High Risk	0	10	5.5	10	0
			≥ 40.0	High Risk	0	9 *	5.0	9	0
						8	0	8	0
						7	0	7	0
						6	0	6	0
						5	0	≤ 5	0
						4	0		
						3	0		
						≤ 2	0		
NOTES:									
Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems									
Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points									
<u>* Minimum Component Values</u>									
Run time ≤ 19:43 mins:secs / Abd Circ ≤ 35.5 inches									
Push-ups ≥ 9 repetitions/one minute / Sit-ups ≥ 20 repetitions/one minute									
<u># Target Component Values</u>									
Member should attain or surpass these to achieve ≥ 75.0 composite score									
Composite Score Categories									
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0									

Cardiorespiratory Endurance			Body Composition			Muscle Fitness			
Run Time (mins:secs)	Health Risk Category	Points	AC (inches)	Health Risk Category	Points	Push-ups (reps/min)	Points	Sit-ups (reps/min)	Points
≤ 14:00	Low-Risk	60.0	≤ 29.0	Low Risk	20.0	≥ 21	10.0	≥ 31	10.0
14:01 - 14:52	Low-Risk	59.8	29.5	Low Risk	20.0	19	9.5	28	9.5
14:53 - 15:20	Low-Risk	59.5	30.0	Low Risk	20.0	18	9.4	27	9.4
15:21 - 15:50	Low-Risk	59.1	30.5	Low Risk	20.0	17	9.0	26	9.0
15:51 - 16:22	Low-Risk	58.6	31.0	Low Risk	20.0	16	8.8	25	8.9
16:23 - 16:57	Low-Risk	57.9	31.5	Low Risk	20.0	15	8.5	24	8.8
16:58 - 17:34	Low-Risk	57.0	32.0	Moderate Risk	17.6	14	8.0	23	8.7
17:35 - 18:14	Low-Risk	55.8	32.5	Moderate Risk	17.1	13 #	7.5	22	8.6
18:15 - 18:56	Low-Risk	54.2	33.0	Moderate Risk	16.5	12	7.0	21	8.5
18:57 - 19:43	Low-Risk	52.1	33.5	Moderate Risk	15.9	11	6.5	20	8.4
19:44 - 20:33	Moderate Risk	49.3	34.0 #	Moderate Risk	15.2	10	6.0	19	8.3
20:34 - 21:28 #	Moderate Risk	45.6	34.5	Moderate Risk	14.5	9	5.7	18	8.2
21:29 - 22:28 *	Moderate Risk	40.8	35.0	Moderate Risk	13.7	8	5.3	17	8.0
22:29 - 23:34	High Risk	0	35.5 *	Moderate Risk	12.8	7 *	5.0	16	7.8
23:35 - 24:46	High Risk	0	36.0	High Risk	0	6	0	15 #	7.5
24:47 - 26:06	High Risk	0	36.5	High Risk	0	5	0	14	7.3
≥ 26:07	High Risk	0	37.0	High Risk	0	4	0	13	7.0
			37.5	High Risk	0	3	0	12	6.5
			38.0	High Risk	0	2	0	11 *	6.0
			38.5	High Risk	0	≤1	0	10	0
			39.0	High Risk	0			9	0
			39.5	High Risk	0			8	0
			≥ 40.0	High Risk	0			7	0
								6	0
								5	0
								4	0
								3	0
								2	0
								≤1	0
NOTES:									
Health Risk Category = low, moderate or high risk for current and future cardiovascular disease, diabetes, certain cancers, and other health problems									
Passing Requirements - member <i>must</i> : 1) meet minimum value in each of the four components, <i>and</i> 2) achieve a composite point total ≥ 75 points									
<u>* Minimum Component Values</u>									
Run time ≤ 22:28 mins:secs / Abd Circ ≤ 35.5 inches									
Push-ups ≥ 7 repetitions/one minute / Sit-ups ≥ 11 repetitions/one minute									
<u># Target Component Values</u>									
Member should attain or surpass these to achieve ≥ 75.0 composite score									
Composite Score Categories									
Excellent ≥ 90.0 pts / Satisfactory = 75.0 - 89.9 / Unsatisfactory < 75.0									

Attachment 3

FITNESS ASSESSMENT VERBAL INSTRUCTIONS

A3.1. Verbal Air Force Fitness Assessment Instructions. Test Administrator read or state: *You are about to complete the fitness assessment. You are presumed fit to participate based on your completion of the FSQ. You may re-accomplish the FSQ if medical concerns have developed since completion, but must do so prior to beginning the fitness assessment. If you experience injury or illness during the fitness assessment, you will have the option of being evaluated at the Military Treatment Facility, but your test may still count. If the medical evaluation validates your illness or injury your commander may invalidate the test results. If the test is invalidated, you will be required to retest within five days. At no time will a back-dated AF 469 (fitness exemption) be accepted. Each component requires minimum performance. If for any reason you do not meet the minimum requirements you are expected to complete the remaining components. Scores for all components are final.*

A3.2. Verbal Body Composition Instructions. The Test Administrator reads the following instructions to all Airmen and demonstrate the proper technique.

A3.2.1. *The abdominal circumference is the assessment for body composition. Please stand facing forward with your arms to your side similar to attention position. I will take the measurement from your right hand side on bare skin only. Before the measurement you will adjust your clothing so it does not fall over your waist during the measurement. I will set the end of the tape directly above your hip-bone (iliac crest) and ask you to hold it in place. I will walk around you to confirm parallel placement of the tape and then I will kneel down to measure the abdominal circumference at the end of your normal breath exhalation. Make sure you do not hold your breath.*

A3.2.2. *I will take your measurement 3 times. If there is more than 1 inch difference I will take a 4th measurement. I will average the closest 3 measurements and round the result down to the nearest 1/2 inch and that will be your recorded score.*

A3.3. Push-Up Verbal Instructions. The Test Administrator reads the following instructions to all Airmen and demonstrate the proper technique.

A3.3.1. *The push-up is one assessment of muscular fitness. Place your palms or fists on the floor, hands will be slightly wider than shoulder width apart with your elbows fully extended. Your feet may be no more than 12 inches apart and should not be supported, braced or crossed. Your body should maintain a rigid head to heel form. This is the up or starting position.*

A3.3.2. *Begin by lowering your body to the ground until your upper arms are at least parallel to the floor (elbows bent at 90 degrees) then return to the up position (arms fully extended but not locked). This is one repetition.*

A3.3.3. *Your chest may touch, but not rest or bounce on the floor. If you do not come down parallel to the floor, the push-up will not count. Resting can only be done in the up position. You may remove your hands or feet from the floor or bridge or bow your back, but only in the up or rest position, resting any other body part on the floor is not allowed. If resting occurs in the down position, the push-up portion of test will be terminated and your score will be based on the correct number of push-ups performed up to that point.*

A3.3.4. *Your breathing should be as normal as possible. Make sure you do not hold your breath. You have one minute to perform as many correct push-ups as you are able. Your counter will count the correct number of push-ups aloud. Your counter will not count incorrect push-ups. Your counter will tell you what you are doing wrong and will repeat the last number of correct push-ups until you correct the error. The total number of correct push-ups in one minute is recorded as your score.*

A3.4. Sit-Up Verbal Instructions. The Test Administrator reads the following instructions to all Airmen and demonstrate the proper technique.

A3.4.1. *Begin by laying face up on the floor or mat. Your feet may extend off the floor or mat, but your buttocks, shoulders, and head must not extend beyond the mat. Bend your knees at 90 degrees, with your feet or heels in contact with the floor at all times. Cross your arms over your chest with your open hands or fingers at your shoulders or resting on your upper chest. This is the starting position. When conducting sit-ups, any part of the hands or fingers remain in contact with the shoulders or upper chest at all times.*

A3.4.1.1. *If a bolted non-portable toe hold bar is used: Anchor your feet to the ground by hooking your feet or toes under the bar. Your heels must remain in contact with the ground at all times and the bar cannot move while you perform the assessment.*

A3.4.1.2. *If a toe hold bar is NOT used: You may request the assessor to hold your feet with their hands or by putting their knees on your feet. The assessor may not anchor you by holding behind the calves or by standing on your feet during the assessment as they could lose balance and step off. You may request an Airman of the same gender to hold your feet and that request must be granted. Let your monitor know if you need your feet held differently prior to beginning the assessment. (e.g., "You are holding my ankles or feet too tight or not enough.").*

A3.4.2. *From the starting position, raise your upper torso until your elbows touch your knees or thighs. Then, lower your upper torso until your shoulder blades contact the floor. This is one repetition. Your elbows must touch your knees or thighs at the top of the sit-up, and your shoulder blades must contact the floor or mat at the bottom of the sit-up (keeping any part of your hands or fingers in contact with your shoulder or upper chest at all times).*

A3.4.3. *The repetition will not count if your hands or fingers come completely away from the chest or shoulder or if your buttocks or heels leave the ground. Additionally, you may not grab onto your shirt as it makes it difficult to determine if you are maintaining proper contact. Any resting must be done in the up position. While resting you may not use knees or any object to support yourself. If there is any resting other than in the up position, the sit-up portion of the test is terminated and your score will be based on the correct number of sit-ups performed up to that point.*

A3.4.4. *You have one minute to perform as many correct sit-ups as you are able. Your counter will count the correct number of sit-ups aloud. Your counter will not count incorrect sit-ups. Your counter will tell you what you are doing wrong and will repeat the last number of correct sit-ups until you correct the error. The total number of correct sit-ups in one minute is recorded as your score.*

A3.5. 1.5 Mile Timed Run Verbal Instructions. The Test Administrator reads the following instructions to all Airmen and demonstrate the proper technique.

A3.5.1. This 1.5 mile timed run is used to measure cardio-respiratory fitness. Prior to beginning the 1.5 mile run, you may complete up to a three minute warm up. You will line up behind the starting line and will be instructed to begin running as I start the stopwatch. No physical assistance from anyone or anything is permitted. Pacing is permitted if there is no physical contact and is not a hindrance to other runners. You are required to stay on and complete the entire marked course. Leaving the course is disqualifying and terminates the test. Your completion time will be recorded when you cross the finish line and you are required to complete a cool down for approximately five minutes. If at any time you are feeling in poor health, you are to stop running immediately and you will be given assistance.

A3.6. 2.0 Kilometer Walk Verbal Instructions. The Test Administrator reads the following instructions to all Airmen and demonstrate the proper technique.

A3.6.1. This test measures cardio-respiratory fitness. Prior to beginning the 2.0 km walk, you may complete up to a three minute warm-up. You will be directed to line up behind the starting line and instructed to begin walking as I start the stopwatch. You are to walk the 2.0 km course as quickly as you can. You must not run, keeping at least one foot in contact with the ground at all times. No physical assistance from anyone or anything is permitted. Pacing is permitted if there is no physical contact and is not a hindrance to others. You are required to stay on and complete the entire marked course. Leaving the course is disqualifying and terminates the test. Your completion time will be recorded when you cross the finish line and you are required to complete a cool-down for approximately five minutes. If at any time you are feeling in poor health, you are to stop immediately and you will be given assistance.

Attachment 4

ALTITUDE TIME CORRECTION FOR 1.5 MILE RUN AND 2.0 KILOMETER WALK

Table A4.1. Altitude Time Correction for 1.5 Mile Run.

	Group 1	Group 2	Group 3	Group 4
	Test altitude	Test altitude	Test altitude	Test altitude
	between	between	between	at or greater than
	5250 ft - 5499 ft	5500 ft - 5999 ft	6000 ft - 6599 ft	6600 ft
1.5-Mile Run Time	Altitude correction	Altitude correction	Altitude correction	Altitude correction
(min:sec)	(sec)	(sec)	(sec)	(sec)
≤ 9:12	0:02	0:06	0:11	0:18
9:13 - 9:22	0:02	0:06	0:11	0:18
9:23 - 9:34	0:02	0:06	0:11	0:19
9:35 - 9:45	0:02	0:07	0:12	0:20
9:46 - 9:58	0:02	0:07	0:12	0:20
9:59 - 10:10	0:02	0:07	0:12	0:20
10:11 - 10:23	0:02	0:07	0:12	0:21
10:24 - 10:37	0:02	0:07	0:12	0:21
10:38 - 10:51	0:02	0:08	0:13	0:22
10:52 - 11:06	0:02	0:08	0:13	0:22
11:07 - 11:22	0:02	0:08	0:13	0:22
11:23 - 11:38	0:03	0:08	0:14	0:23
11:39 - 11:56	0:03	0:09	0:15	0:24
11:57 - 12:14	0:03	0:09	0:15	0:25
12:15 - 12:33	0:03	0:09	0:15	0:26
12:34 - 12:53	0:03	0:09	0:16	0:26
12:54 - 13:14	0:03	0:09	0:16	0:27
13:15 - 13:36	0:03	0:10	0:16	0:28
13:37 - 14:00	0:03	0:10	0:17	0:28
14:01 - 14:25	0:03	0:10	0:17	0:29
14:26 - 14:52	0:03	0:11	0:18	0:31
14:53 - 15:20	0:03	0:11	0:18	0:31
15:21 - 15:50	0:04	0:11	0:19	0:32
15:51 - 16:22	0:04	0:12	0:20	0:34
16:23 - 16:57	0:05	0:13	0:21	0:36
16:58 - 17:34	0:05	0:13	0:22	0:37
17:35 - 18:14	0:05	0:14	0:23	0:38
18:15 - 18:56	0:05	0:14	0:24	0:40
18:57 - 19:43	0:05	0:15	0:25	0:42
19:44 - 20:33	0:05	0:15	0:26	0:43
20:34 - 21:28	0:06	0:17	0:28	0:46
21:29 - 22:28	0:06	0:18	0:29	0:49
22:29 - 23:34	0:06	0:18	0:31	0:51
23:35 - 24:46	0:06	0:19	0:32	0:54
24:47 - 26:06	0:07	0:20	0:34	0:57
≥ 26:07	0:08	0:22	0:37	1:02

Table A4.2. Altitude Time Correction for 2.0 Kilometer Walk (Male).

Age (yrs)	2.0 km Maximum Walk Time (min:secs)	Group 1 5250 ft – 2.0 km Maximum (min:secs)	Group 2 5500 ft – 2.0 km Maximum (min:secs)	Group 3 6000 ft – 2.0 km Maximum (min:secs)	Group 4 > 6600 ft 2.0 km Maximum (min:secs)
< 30	16:16	16:18	16:22	16:25	16:31
30 - 39	16:18	16:20	16:24	16:27	16:33
40 - 49	16:23	16:25	16:28	16:31	16:37
50 - 59	16:40	16:42	16:45	16:48	16:53
60 +	16:58	16:59	17:02	17:05	17:10

Table A4.3. Altitude Time Correction for 2.0 Kilometer Walk (Female).

Age (yrs)	2.0 km Maximum Walk Time (min:secs)	Group 1 5250 ft – 2.0 km Maximum (min:secs)	Group 2 5500 ft – 2.0 km Maximum (min:secs)	Group 3 6000 ft – 2.0 km Maximum (min:secs)	Group 4 > 6600 ft 2.0 km Maximum (min:secs)
< 30	17:22	17:25	17:30	17:34	17:42
30 - 39	17:28	17:30	17:35	17:40	17:47
40 - 49	17:49	17:52	17:56	18:00	18:07
50 - 59	18:11	18:13	18:17	18:21	18:28
60 +	18:53	18:54	18:58	19:02	19:08

Attachment 5**WRITTEN ORDER FOR FITNESS ASSESSMENT CELL (FAC) AUGMENTEES****Sample Order**

Date:

MEMORANDUM FOR FITNESS ASSESSMENT CELL REPRESENTATIVES, UNIT
FITNESS PROGRAM MANAGERS, AND FITNESS ASSESSMENT CELL AUGMENTEES

FROM: (Installation Commander - highly recommended)

SUBJECT: *Written Order – Duties Associated with Air Force Physical Fitness Program*

As Part of your duties in the Air Force Physical Fitness Program will require you to have access to sensitive and protected Privacy Act information regarding Airmen. That information includes, but is not limited to, fitness test scores, social security numbers (SSN), and medical informatio

You are hereby ordered to correctly record all fitness test results as required as part of your duties. You will not alter or change an Airman's fitness test results. You are ordered not to release, reveal, or disclose any Airman's fitness scores, SSNs, medical information or other information received as part of your duties associated with the Air Force Physical Fitness Program.

Violations of this order may subject you to administrative and or disciplinary action under the Uniform Code of Military Justice.

(Commander's Signature)

1st Ind, (Airman's name and office symbol) MEMORANDUM FOR
I hereby acknowledge understanding and receipt of this order.

Date:

(Airman's Signature)

Attachment 6**SAMPLE MEMORANDUM FOR TDY OR PME****Sample Memorandum for TDY or Professional Military Education**

(Appropriate Letterhead)

Date

MEMORANDUM FOR COMMANDANT or TDY COMMANDER

FROM: UNIT COMMANDER

SUBJECT: Fitness Intervention, Follow-up, and Assessment Requirements

(Rank, Name) received an unsatisfactory fitness score on (date). He or she is enrolled in the Fitness Improvement Program:

The Airman must continue on the Fitness Improvement Program while TDY. Please ensure enrollment in local programs.

The Airman must be reevaluated not later than (date).

(Signature, Unit Commander)

Attachment:

Individual Fitness Assessment Report

1st Ind, COMMANDANT/COMMANDER

MEMORANDUM FOR UNIT COMMANDER

(Rank, Name) did or did not enroll and participate in the required improvement programs.

A fitness assessment was accomplished on (assessment date) with a score of (composite fitness score).

(Commandant)

Attachment: Individual Fitness Assessment Report

Attachment 7

ADMINISTRATIVE AND PERSONNEL ACTIONS

A7.1. General. This attachment provides optional administrative and personnel actions ([Table A7.1](#)) for failing.

Table A7.1. Optional Administrative and Personnel Actions (See notes).

Unsatisfactory Fitness Score by PECD or SCOD (Enlisted)					
Defer or Withhold Promotion or Not Recommend (Enlisted)			X	X	X
Unsatisfactory Fitness Score	1st Fail	2nd Fail	3rd Fail	4th+ Fail	
Verbal Counseling	Use anytime and as often as needed and in conjunction with other options below				
Letter of Counseling	X	X			
Letter of Admonition	X	X			
Limit Supervisory Responsibilities	X	X	X	X	
Letter of Reprimand	X	X	X	X	
Referral Evaluation	X	X	X	X	
Delay Promotion (Officer) (see AFI 36-2501, <i>Officer Promotions and Selective Continuation</i> , Chapter 5)	X	X	X	X	
Establish Unfavorable Information File		X	X	X	
Reenlistment Ineligibility (see NOTE 2)		X	X	X	
Remove Supervisory Responsibilities			X	X	
Deny Voluntary Retraining			X	X	
Deny Formal Training			X	X	
Placement on Control Roster			X	X	
Reenlistment Non-selection (see NOTE 2)			X	X	
Remove Promotion (Officer)			X	X	
Administrative Demotion (Enlisted)			X	X	
Administrative Separation				X	
<i>Air Reserve Component only.</i> Transfer to Obligated Reserve Section or Non-obligated, Non-participating Ready Personnel Section				X	

Notes:

1. This is illustrative and not binding. Unit commanders exercise discretion when selecting optional command action(s) keeping in consideration the need for progressive discipline and the requirement for a separation package to be processed after the 4th failure in 24 months (or 36 months). Commanders may use more than one action per failure. Recommend commanders consult with their local Staff Judge Advocate. Refer to the governing instructions to determine the correct form and procedures for each action.
2. Commanders may render an Airman ineligible for reenlistment rather than denying reenlistment by specifying ineligibility versus non-selection on the AF Form 418, *Selective Reenlistment Program Consideration*. This allows the flexibility of authorizing Airmen to extend their reenlistment for either 4 or 7 months (7 or 12 for ARC) to improve their fitness level. Airmen non-selected for reenlistment are not allowed to extend for any reason and will separate on the date of separation. Commanders may complete a second AF Form 418 changing the Airman's ineligibility or non-selection status at any time.
3. For ARC, the use of this option should be weighed against use of administrative separation and is applicable where recall of this Airman would not jeopardize mission readiness.
4. If an Airman has a history of fitness assessment failures, then passes, only to fail again – commanders should consider a more aggressive approach for OPTIONAL actions.

Attachment 8

**SAMPLE MEMORANDUM FOR MEDICAL VALIDATION OF FITNESS
ASSESSMENT ILLNESS OR INJURY**

Sample Medical Validation Memorandum

(Appropriate Letterhead)

MEMORANDUM FOR UNIT COMMANDER (date)
FROM: (Military Treatment Facility Medical Provider)
SUBJECT: Medical Validation of Fitness Assessment Illness or Injury

I evaluated (rank, name) on (date) for a reported injury or illness that occurred during the fitness assessment on (date) in accordance with AFMAN 36-2905, *Air Force Physical Fitness Program*.

I (validate or do not validate) the reported injury or illness adversely impacted the fitness assessment score.

(Signature, Rank, Phone Number of Provider)

Attachment 9**SAMPLE MEMORANDUM FOR MEDICAL EVALUATION FOLLOWING
MULTIPLE UNSATISFACTORY FITNESS ASSESSMENTS****Sample Medical Evaluation Request**

MEMORANDUM FOR MILITARY TREATMENT FACILITY MEDICAL PROVIDER

FROM: _____/CC(F)

SUBJECT: Medical Condition Determination for Fitness Assessment Test Failures

Please determine whether there was a medical condition that precluded (*Rank, First and Last Name*) from achieving a passing score on the fitness assessment tests identified in the table below.

Please contact me at DSN _____ with any questions.

_____, USAF
(*Name*) (*Rank*)
Commander or First Sergeant

1st Ind, MILITARY TREATMENT FACILITY MEDICAL PROVIDER

TO: UNIT/CC(F)

I have reviewed the Airman's medical record for each of the following fitness assessment tests as indicated by my initials below. I may be reached at DSN_____.

Figure A9.1. Sample Medical Evaluation Request.

Filled in by Unit (CC, CCF or UFPM)						Completed by MTF Medical Provider	
Airman took fitness assessment test on:	For this test, the Airman was:					For this test, the Airman:	
(Fill in fitness assessment failure dates for which a medical determination is required. If there is already a medical opinion on past failure, do NOT request another medical determination for that test.)	not exempt from any portion of the fitness assessment test	exempt from run or walk.	exempt from sit-ups.	exempt from push-ups.	exempt from abdominal circumference measurement.	had a documented medical condition that precluded them from achieving a passing score in a non-exempt portion of the fitness assessment test.	did not have a documented medical condition that precluded them from achieving a passing score in a non-exempt portion of the fitness assessment test.
____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signature & Stamp of Military Treatment Facility Medical Provider and Date

Signature & Stamp of Senior Profiling Officer and Date

This document/attachment may contain information which must be protected IAW AFI 33-332 and DoD Reg 5400.11; Privacy Act of 1974 as amended Title 5 United States Code Section 552a applies, and is For Official Use Only (FOUO). RECIPIENT IS RESPONSIBLE FOR SAFEGUARDING AND MAINTAINING THIS PRODUCT IAW THE PRIVACY ACT OF 1974, PL 93-579.

Attachment 10

TIER-2 AIR FORCE PHYSICAL FITNESS ESTABLISHMENT PROCEDURES

A10.1. This establishes the process for creating physical fitness assessments for career fields with occupationally-specific and operationally relevant fitness requirements not adequately assessed using the Air Force's standard physical fitness assessment (Tier-1)—aerobic, push-ups, and sit-ups.

A10.2. Approval. Functional authorities who desire the establishment of an occupationally-specific physical fitness assessment (Tier 2) request approval to conduct a Tier-2 physical fitness assessment study from the Deputy Chief of Staff for Manpower, Personnel, and Services (AF/A1). If approved, functional authorities fund the study and must work with the Air Force Exercise Science Unit (AFPC/DSYX). Collaboration with the Exercise Science Unit to ensure all physical fitness assessment components are essential to combat readiness, align with the needs and mission of the Department of Defense and the Air Force. They adhere to established scientific principles of physical conditioning that enhance fitness and general health.

A10.3. All Tier-2 physical fitness assessment studies consist of the following five steps:

a. *Step 1 - Identify Physical Job Demands.* Career field managers and exercise experts work with AFPC/DSYX to analyze job demands and requirements. In this step, duty tasks that are both physically demanding and critical to mission success will be identified.

b. *Step 2 - Develop Physical Fitness Assessment and Physical Task Simulations.* AFPC/DSYX uses the results of the analysis and existing/emerging training methodologies to develop physical task simulations and physical fitness assessments to evaluate Airmen's ability to perform the simulations. Results are validated based on operational requirements and physical movement patterns, ensuring compliance with Department of Defense standards--aerobic capacity, muscular strength, muscular endurance, and gender neutrality. These simulations include risk assessment for prevention of injuries and will reflect levels of physical abilities necessary to meet the duty demands of the occupation.

c. *Step 3 - Validate and Set Physical Assessment Standards.* AFPC/DSYX tests the results using scientific data analysis and a scheduled prototype test. The results are judged using test data, metabolic equivalents (exercise intensity), and mission or environmental effector data

d. *Step 4 - Implement, Train, Verify, and Refine Prototype Physical Fitness Assessment and Standards.* AFPC/DSYX work with the career field manager and exercise experts to conduct verification tests (refining if needed). Once complete, AFPC/DSYX teaches the exercise principles and methods to the career field exercise experts, conduct a practice physical fitness assessment using the results from Step 2, and administer surveys to physical training leaders and test subjects.

e. *Document and Deliver Results During Adaptation Period.* AFPC/DSYX documents results and submit a detailed report to AFPC/CC for endorsement to AF/A1P. AF/A1P staffs the report through AF/SE and AF/SG to AF/A1 for approval. At a minimum, AF/A1 informs AF/CC and AF/CCC of the new Tier-2 physical fitness assessment.

A10.4. During the period of the physical fitness assessment development, Airmen continue to take the Tier-1 physical fitness assessment. If the Tier-2 physical fitness assessment is approved, the following rules apply.

- a. Airmen in the applicable AFSCs will no longer take the Tier-1 physical fitness assessment.
- b. Airmen in the applicable AFSCs are provided an adjustment period of no more than one year from approval. On completion of the adjustment period, Airmen are required to complete the abdominal circumference component in addition to their newly approved Tier-2 physical fitness assessment.
- c. Functional authorities submit to AF/A1 for approval a draft Air Force Guidance Memorandum to update the operational Air Force Instruction. The Air Force Guidance Memorandum provides detailed guidance on the occupational physical fitness standards.
- d. AFPC/DP3 updates the fitness data repository system.

A10.5. Exceptions or deviations to the occupational requirements evaluation process ([paragraph A10.3](#), of this manual) submitted in writing to AF/A1P for decision.

A10.6. Questions pertaining to this memorandum can be addressed to AF/A1PPP at AF.A1PPP.Workflow@us.af.mil.