Print Form

__07_ __02__ ___
CC SC PC

WELL Arizona
Post-Questionnaire

ID# _____

Sex: ☐ Male ☐ Female

Age: _____years **Weight**: ☐ lbs
(optional)

PHYSICAL ACTIVITY

1) During the past month, other than your regular job or school, did you participate in any physical activities or exercise such as running, calisthenics, golf, gardening, or walking for exercise? (check one)

☐ **YES** ☐ **NO** ☐ **DON'T KNOW**

2) Now, thinking about the moderate physical activities you do in a usual week, do you do moderate activities for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes small increases in breathing or heart rate? (check one)

☐ **YES** ☐ **NO** ☐ **DON'T KNOW**

3) How many days per week do you do these moderate activities for at least 10 minutes at a time? (fill in or check don't know)

☐ **days/week** ☐ **DON'T KNOW**

4) On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? (fill in or check don't know)

☐ **:** ☐ **/day** ☐ **DON'T KNOW**
(hrs) **(min)**

5) Now thinking about the vigorous physical activities you do in a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate? (check one)

☐ **YES** ☐ **NO** ☐ **DON'T KNOW**

6) How many days per week do you do these vigorous activities for at least 10 minutes at a time? (fill in or check don't know)

☐ **days/week** ☐ **DON'T KNOW**

7) On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? (fill in or check don't know)

☐ **:** ☐ **/day** ☐ **DON'T KNOW**

(hrs) **(min)**

Thank you for your participation. If there is anything else you would like to share with us, please write your comments in the space below: