

SIGNS OF HEALTH, SIGNS OF ILLNESS**Worksheet**

Name _____ Date _____

Directions: In the spaces below, list three signs of a healthy person and three signs of an unhealthy person.Signs of a healthy person:

1. _____
2. _____
3. _____

Signs of an unhealthy person:

1. _____
2. _____
3. _____

HOW FIT AM I?**Worksheet**

Name _____ Date _____

Directions: Check the box next to the sentence in each pair that best tells about you.

1. ☐ I usually can do lots of things and not get tired.
☐ I get tired easily.
2. ☐ I am hardly ever sick.
☐ I get sick a lot.
3. ☐ I can lift and carry medium to large size loads.
☐ I usually have trouble lifting or carrying heavy things.
4. ☐ I can easily climb or run without getting out of breath.
☐ I usually run out of breath soon after I start climbing or running.
5. ☐ I can bend or stretch my body with little trouble.
☐ It usually hurts when I bend or stretch my body.
6. ☐ I am in the right weight range for my height.
☐ I need to lose or gain weight according to the weight/height chart.

How fit are you?

Add up how many first sentences are marked in each pair. If you have six, you are in great shape. If you have three, you are OK, but could be better.

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MY EXERCISE PLAN

Worksheet

Name _____ Date _____

Directions: Develop an exercise plan for yourself by filling in the spaces below.

Exercises _____

What I will need _____

Where I will do it _____

Who I will do it with _____

How often _____

When _____

How long _____