Name ____________________________________________ Date __________

Resting Heart Rate: __________

HR_{max} \text{ (estimate)}: __________

Blood Pressure \text{ (if indicated by PAR-Q/medical history)}: __________

**YMCA 3-Minute Step Test**

Recovery Heart Rate: __________

To determine the client’s cardiorespiratory fitness rating for this test, compare the recovery heart rate to **Table 11.13** in the *NASM Essentials of Personal Fitness Training (7th ed.)* textbook.

<table>
<thead>
<tr>
<th>Very Poor</th>
<th>Poor</th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

**Rockport Walk Test**

Time: __________  Heart Rate: __________

To determine the client’s cardiorespiratory fitness rating for this test, compare the completion time to **Table 11.14** in the *NASM Essentials of Personal Fitness Training (7th ed.)* textbook.

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Average</th>
<th>Above Average</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

**1.5 Mile Run**

Time: __________  Heart Rate: __________

To determine the client’s cardiorespiratory fitness rating for this test, compare the completion time to **Table 11.15** or **Table 11.16** in the *NASM Essentials of Personal Fitness Training (7th ed.)* textbook.

<table>
<thead>
<tr>
<th>Very Poor</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
<th>Superior</th>
</tr>
</thead>
</table>

**VT1 / VT2 Talk Test**

Time to VT1: _____  VT1 Heart Rate: _____  Time to VT2: _____  VT2 Heart Rate: _____