

X-SCI Fitness Test Tracking Sheet

Name _____

Rotation _____

FITNESS TEST	Concept of fitness tested	1 st grading per.		2 nd grading per.		3 rd grading per.					
		Date		Date		Date					
Mile / VO2max											
Shoulder stretch (Lf/Rt)											
40 yard dash											
Push up test											
Stork test											
Standing long jump											
Medicine ball throw											
Wall toss test											
Ruler test											
Height / Weight / BMI											
Shuttle Run											
Dot Drill	<table border="1" style="margin: auto; border-collapse: collapse;"> <tr style="background-color: #cccccc;"><td style="width: 50px; height: 20px;"></td></tr> <tr><td style="width: 50px; height: 20px;"></td></tr> <tr style="background-color: #cccccc;"><td style="width: 50px; height: 20px;"></td></tr> <tr><td style="width: 50px; height: 20px;"></td></tr> </table>										

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Curl ups											
Pull-ups <i>(optional)</i>											