

Performance Evidence Guidance Form

iUSP152 – Planning gym-based exercise

A total of 3 gym-based exercise performance evidence to be carried out and results documented

To be completed by the lecturer and verified by the external examiner. Please attach a copy of this sheet to the front of each learner's completed treatment evidence form.

Learner name: _____

Learner number: _____

Centre name: _____

Date: _____

	Please tick box:	Yes	No
Completed Physical Activity Readiness Questionnaire (PARQ)			
Fitness test <ul style="list-style-type: none"> • Cardiorespiratory including heart rate • Body composition • Musculoskeletal 			
Exercise programme <ul style="list-style-type: none"> • Rationale for choice of exercises • Rationale for heaviness of weight • Appropriate number of reps and sets recommended • Alternative choice of exercises given 			
Client feedback			
Home care advice			
Overall conclusion of the exercise session			
Self-reflection at the end of each exercise session			
Performance complete			

Please note; each box must be ticked 'Yes' in order to gain a pass grade. If any area is answered 'No' the performance evidence will be referred until the omitted section is completed.

External examiner name: _____

External examiner signature: _____ Date: _____

Lecturer/Assessor name: _____

Lecturer/Assessor signature: _____ Date: _____

Learner name: _____

Learner signature: _____ Date: _____

Document History

Version	Issue Date	Changes	Role
v1	27/09/2019	First published	Qualifications Administrator