Please circle the response that best fits you for the following questions. If you circle YES (you did the activity), circle the number of days in the past week ( 7 days) that you did the activity.

| In the past week (7 days), did you... |  |  | Number of days |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Have PE/gym classes? | No | Yes | $\square$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Play on an organized school sports team? | No | Yes | $\square$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Walk or bike to or from school? | No | Yes | $\square$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Play actively during recess or other free-time during the school day? | No | Yes | $\Rightarrow$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Participate in physical activity in an afterschool program? | No | Yes | $\square$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Play on an organized, non-school sports team? | No | Yes | $\Rightarrow$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Participate in physically active classes or lessons? (dance, tennis, karate, gymnastics, etc) | No | Yes | $\Rightarrow$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Do weight training? | No | Yes | $\Rightarrow$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Ride your bike or other wheeled toys for fun or exercise? (scooter, skateboard, rollerblades, rollerskates, etc.) | No | Yes | $\Rightarrow$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Run or jog for fun or exercise? | No | Yes | $\square$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Walk for fun or exercise? | No | Yes | $\square$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Play actively at home? | No | Yes | $\square$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Play actively at a friend's house? | No | Yes | $\square$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Play actively in your neighborhood? | No | Yes | $\Rightarrow$ | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

## Administrator Guidelines

1. Provide each participant with the survey and pencil.
2. Provide the following instructions to participants, making sure that no one begins prior to receiving the instructions.
"This survey asks about the physical activities that you have done in the past week. Since today is $\qquad$ , we want to know only about the activities that you have done between last $\qquad$ and today. For each activity, you will choose yes or no, depending on whether or not you did the activity in the past week. If you did the activity, circle yes and then also circle the number of days that you did that activity. If you did not do the activity, circle no and move to the next activity. Are there any questions?
3. Make sure that each survey is labeled with the corresponding participant name and/or ID.

## Scoring Method

To score the instrument, the number of days each activity was performed will be summed. If an activity was not performed (child reports NO), a value of zero is given to that activity.

There are some activities that can only performed on a maximum of 5 days per week. Those activities are: PE/gym classes, playing an organized school sports team, walking or biking to or from school, playing actively at recess or other free-time during the school day, and participating in an afterschool program.

The score can range from 0 to 88 .

## Scoring Algorithm

Score $=\Sigma$ (days reported for each activity)

