LOAD/SPEED ASSESSMENTS FORM

Push-up Assessment
Number performed:__________
Performance rating:__________

Body-weight Squat Assessment
Number performed:__________
Performance rating:__________

1-RM Bench-press Assessment

Set 1
Resistance: ___________
Number of repetitions: ___________

Set 2
Resistance: ___________
Number of repetitions: ___________

Set 3
Resistance: ___________
Number of repetitions: ___________

Set 4
Resistance: ___________
Number of repetitions: ___________

Set 5 (if needed)
Resistance: ___________
Number of repetitions: ___________

Set 6 (if needed)
Resistance: ___________
Number of repetitions: ___________

1-RM effort
Resistance: ___________
Number of attempts: ___________

Comments: ______________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________

Absolute strength: ___________
Relative strength: ____________ (1-RM/Client’s weight)
Performance rating: ___________
1-RM Squat Assessment

Set 1
Resistance: ____________
Number of repetitions: ____________

Set 2
Resistance: ____________
Number of repetitions: ____________

Set 3
Resistance: ____________
Number of repetitions: ____________

1-RM effort
Resistance: ____________
Number of attempts: ____________

Comments: ____________________________________________________
________________________________________________________________
________________________________________________________________

Absolute strength: ____________
Relative strength: ____________ (1-RM/Client’s weight)
Performance rating: ____________

Vertical Jump Assessment

Trial 1 (cm)

Trial 2 (cm)

Trial 3 (cm)

T-Test—Speed, Agility, and Quickness Assessment

Trial 1
Time: ____________
Additional Notes: ____________________________

Trial 2
Time: ____________
Additional Notes: ____________________________