

## Nutrition, Exercise and Goals Questionnaire

Name: \_\_\_\_\_ Date: \_\_\_\_\_

### **Nutrition**

How many diets have you been on in the last 3 years? \_\_\_\_\_

Describe any diets you've been on. Did you go to a commercial weight-loss service such as Weight Watchers, LA Weight Loss, etc? Did you use a diet book or online service? Did you just do your own plan or a combination of the above?

---

---

---

Describe the results you had with any of these diets. How much weight did you lose? Did you gain any of it back? Did you experience any problems while dieting?

---

---

---

Yes    No

\_\_\_\_    \_\_\_\_    Do you regularly read food labels?

\_\_\_\_    \_\_\_\_    Are you ever hungry again within 1 – 2 hours of eating?

\_\_\_\_    \_\_\_\_    Do you regularly eat breakfast?

How much water do you drink in a typical day?

\_\_\_\_\_  
How many times per day do you eat on average?

\_\_\_\_\_

\_\_\_\_    \_\_\_\_    Do you ever eat when you are not hungry? If so, are there any specific reasons why?

\_\_\_\_    \_\_\_\_    Are you responsible for the grocery shopping in your household?

How many times per week do you eat at restaurants (eat in or take out)? \_\_\_\_\_

**Exercise**

Yes    No

\_\_\_\_\_ Are you currently involved in a regular exercise program?

If yes, how many days per week are you exercising? \_\_\_\_\_

How many minutes per day are your exercise sessions? \_\_\_\_\_

\_\_\_\_\_ Do you regularly perform aerobic or cardiovascular exercise?

If yes, how many days per week? \_\_\_\_\_

\_\_\_\_\_ Do you regularly perform resistance or weight training?

If yes, how many days per week? \_\_\_\_\_

\_\_\_\_\_ Do you regularly participate in competitive or recreational sports?

If yes, please list:

\_\_\_\_\_

\_\_\_\_\_ Have you tried exercise programs before, but been unable to stick with them?

If yes, please list the reason(s):

\_\_\_\_\_

On a scale of 1 to 5, how physically demanding is your job? (1 = at a desk all day, 5 = construction laborer, lumberjack, etc.) \_\_\_\_\_

How much time are you willing to dedicate to a fitness program?

\_\_\_\_\_ sessions per week    \_\_\_\_\_ minutes per session

I will perform my workouts at:

\_\_\_\_\_ Home    \_\_\_\_\_ Commercial Gym    \_\_\_\_\_ Other (please explain below)

I will have the following equipment available:

\_\_\_\_\_ Commercial gym equipment (free weights, machines, stability balls, cardio equip., etc)

\_\_\_\_\_ Free weights ( barbells, dumbbells) machines

\_\_\_\_\_ Commercial gym

\_\_\_\_\_ Stability ball

\_\_\_\_\_ Medicine balls

\_\_\_\_\_ Resistance tubing

\_\_\_\_\_ Multi-station home gym

\_\_\_\_\_ Bench

\_\_\_\_\_ Cardio equipment

\_\_\_\_\_ Other (please explain below)

Rank your goals in undertaking a fitness program. What do you want this program to do for you? Use the following scale to rate each goal separately.

**Not at all**  
Important  
1

2

**Somewhat**  
Important  
3

4

5

**Extremely**  
Important  
6

\_\_\_\_\_ a. Improve cardiovascular fitness

\_\_\_\_\_ b. Body-fat weight loss

\_\_\_\_\_ c. Improve performance for a specific sport

\_\_\_\_\_ d. Improve flexibility

\_\_\_\_\_ f. Increase energy level

\_\_\_\_\_ e. Increase strength

\_\_\_\_\_ h. Enjoyment

\_\_\_\_\_ g. Feel better

\_\_\_\_\_ j. Pain relief

\_\_\_\_\_ i. Reduce stress

\_\_\_\_\_ l. Gain weight/muscle

\_\_\_\_\_ k. Lose weight/inches

\_\_\_\_\_ n. Improve overall health

\_\_\_\_\_ m. Improve quality of life

\_\_\_\_\_ p. Other \_\_\_\_\_

\_\_\_\_\_ o. Improve appearance