

SCHEDULE "B"

PHYSICAL ACHIEVEMENT TEST (PAT-ENPQ) REPORT

" LAST NAME" _____		" FIRST NAME" _____	
Permanent Code "CODE" _____	Sex "SEX" _____	Assessment Date _____	
College Institution "COLLEGE" _____		A.E.C. <input type="checkbox"/> yes	
Addresses "STREET", "CITY", "PROVSTATE" _____			
Postal Code "POSTAL CODE" _____	Telephone "TELEPHONE" _____		
E-mail address _____			

AEROBIC ENDURANCE TEST – 20-Metre Scheduled Run (Minimum to be achieved: 6.5 levels)	
Wave number: _____	
Group: _____	Number of completed levels: _____ , _____
Bib number: _____	
Trainer's initials: _____	Decision : P <input type="checkbox"/> F <input type="checkbox"/>

TIMING CIRCUIT (Maximum duration of 392 seconds)			
Timing circuit elapsed time		Faults – <i>The ditch</i>	
		Call	Centre
		Reception	
Light targets	<input type="text"/>	Lap 1	<input type="checkbox"/>
Total penalties*	<input type="text"/>	Lap 2	<input type="checkbox"/>
Total time	<input type="text"/>	Lap 3	<input type="checkbox"/>
		* 3/10 sec.	* 10 sec.
		* 3/10 sec.	
Trainer's initials: _____	Decision : P <input type="checkbox"/> F <input type="checkbox"/>		

AUTONOMOUS STATIONS				
		Stages of CPR (Chronological order)		Order
Push-up tests ① ② ③ ④	P <input type="checkbox"/> F <input type="checkbox"/>	Check state of consciousness		
Pull-up tests ① ② ③ ④	P <input type="checkbox"/> F <input type="checkbox"/>	Open respiratory tract		
Dummy carrying	P <input type="checkbox"/> F <input type="checkbox"/>	Check breathing		
CPR	P <input type="checkbox"/> F <input type="checkbox"/>	Insufflate twice (2)		
		Compress 30 times		
Time lapsed since the applicant began performing CPR: _____				
Total time for 3 rd section: _____				
Trainer's initials: _____	Decision: P <input type="checkbox"/> F <input type="checkbox"/>			

RESULT			
Final result:	P <input type="checkbox"/>	F <input type="checkbox"/>	Note: P = Pass F = Fail
Signature of person in charge of assessment _____			