BTEC Level 2 Teamwork and Personal Development in the Community
Unit 4: Improving Health and Fitness for Personal Wellbeing

For completion by the VQ Officer or an appropriate assessor

CVQO registration number:	**VQ**
Learner name(CAPS):	

This form can provide evidence that the learner participated in <u>two</u> different methods of fitness testing to determine personal fitness.

Learner must take part in **two fitness** tests below.	
RUN	**1.5 miles (2.4 Km)** Completed: YES ☐ NO ☐ Time:
TRUNK CURL	**As many as possible in one minute** Number achieved:
PUSH UPS	**As many as possible in one minute** Hand/Foot version ☐ or Hand/Knee version ☐ Number achieved:

Tutor - Comments and feedback:

Learner comment:			
Learner signature:		Date:	

Tutor signature:	*"I confirm that this is a true and accurate account"*		
Tutor name (CAPS):			
Job role:		Date:	

When completed this tutor testimony must be passed to the learner. The learner can then sign, date and comment on your feedback and submit it with their work.