



# Personal Fitness

## Merit Badge Workbook

This workbook can help you but you still need to read the merit badge pamphlet.

The work space provided for each requirement should be used by the Scout to make notes for discussing the item with his counselor, not for providing the full and complete answers. Each Scout must do each requirement.

No one may add or subtract from the official requirements found in **Boy Scout Requirements** (Pub. 33216 – SKU 34765).

The requirements were last issued or revised in 2012 • This workbook was updated in March 2012.

Scout's Name: \_\_\_\_\_ Unit: \_\_\_\_\_

Counselor's Name: \_\_\_\_\_ Counselor's Phone No.: \_\_\_\_\_

<http://www.USScouts.Org> • <http://www.MeritBadge.Org>

Please submit errors, omissions, comments or suggestions about improving this workbook to: [Workbooks@USScouts.org](mailto:Workbooks@USScouts.org)

**Note:** *If meeting any of the requirements for this merit badge is against the Scout's religious convictions, the requirement does not have to be done if the Scout's parents and the proper religious advisors state in writing that to do so would be against religious convictions. The Scout's parents must also accept full responsibility for anything that might happen because of this exemption.*

1. Do the following.

- a. Before completing requirements 2 through 9, have your health-care practitioner give you a thorough examination using the Scout medical examination form.

Describe the examination. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tell what questions the doctor asked about your health. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tell what health or medical recommendations the doctor made and report what you have done in response to the recommendations.

Recommendations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Response: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain the following:

1. Why physical exams are important \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Why preventative habits (such as exercising regularly) are important in maintaining good health, and how the use of tobacco products, alcohol, and other harmful substances can negatively affect our personal fitness.

Why preventative habits are important: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Effect of tobacco products, alcohol, and other harmful substances: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Diseases that can be prevented and how \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. The 7 warning signs of cancer: \_\_\_\_\_  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_  
5. \_\_\_\_\_  
6. \_\_\_\_\_  
7. \_\_\_\_\_

5. The youth risk factors that affect cardiovascular fitness in adulthood

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b. Have a dental examination. Get a statement saying that your teeth have been checked and cared for.

Tell how to care for your teeth. \_\_\_\_\_

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2. Explain to your merit badge counselor verbally or in writing what personal fitness means to you, including:

a. Components of personal fitness \_\_\_\_\_

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b. Reasons for being fit in all components \_\_\_\_\_

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c. What it means to be mentally healthy \_\_\_\_\_

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d. What it means to be physically healthy and fit \_\_\_\_\_

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e. What it means to be socially healthy. \_\_\_\_\_

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Discuss your activity in the areas of healthy social fitness \_\_\_\_\_

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f. What you can do to prevent social, emotional, or mental problems? \_\_\_\_\_

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3. With your counselor answer and discuss the following questions:

a. Are you free from all curable diseases? \_\_\_\_\_  
\_\_\_\_\_

Are you living in such a way that your risk of preventable diseases is minimized? \_\_\_\_\_  
\_\_\_\_\_

b. Are you immunized and vaccinated according to the advice of your health-care provider? \_\_\_\_\_  
\_\_\_\_\_

c. Do you understand the meaning of a nutritious diet and know why it is important for you? \_\_\_\_\_  
\_\_\_\_\_

Does your diet include foods from all food groups? \_\_\_\_\_  
\_\_\_\_\_

d. Are your body weight and composition what you would like them to be and do you know how to modify it safely through exercise, diet, and behavior modification? \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

e. Do you carry out daily activities without noticeable effort? \_\_\_\_\_  
\_\_\_\_\_

Do you have extra energy for other activities? \_\_\_\_\_  
\_\_\_\_\_

f. Are you free from habits relating to poor nutrition and the use of alcohol, tobacco, drugs, and other practices that could be harmful to your health?

Nutrition: \_\_\_\_\_

Alcohol: \_\_\_\_\_

Tobacco: \_\_\_\_\_

Drugs: \_\_\_\_\_

Other practices: \_\_\_\_\_

g. Do you participate in a regular exercise program or recreational activities? \_\_\_\_\_  
\_\_\_\_\_

h. Do you sleep well at night and wake up feeling refreshed and energized for the new day? \_\_\_\_\_  
\_\_\_\_\_

i. Are you actively involved in the religious organization of your choice, and do you participate in its youth activities? \_\_\_\_\_  
\_\_\_\_\_

j. Do you spend quality time with your family and friends in social and recreational activities? \_\_\_\_\_  
\_\_\_\_\_

k. Do you support family activities and efforts to maintain a good home life? \_\_\_\_\_  
\_\_\_\_\_

4. Explain the following about physical fitness:

a. The components of physical fitness \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. Your weakest and strongest component of physical fitness \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c. The need to have a balance in all four components of physical fitness  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

d. How the components of personal fitness relate to the Scout Laws and Scout Oath  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Explain the following about nutrition:

a. The importance of good nutrition \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. What good nutrition means to you \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c. How good nutrition is related to the other components of personal fitness \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

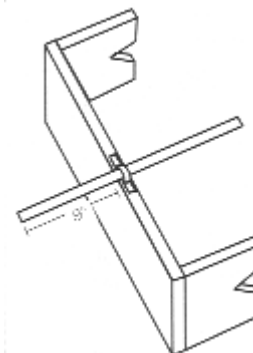
d. The three components of a sound weight (fat) control program  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Before doing requirements 7 and 8, complete the aerobic fitness, flexibility, muscular strength, and body composition tests as described in the *Personal Fitness* merit badge pamphlet. Record your results and identify those areas where you feel you need to improve.

<b>Aerobic Fitness Test</b>	Record your performance on ONE of the following tests:	Need to improve?
a. Run/walk as far as you can in nine minutes		
b. Run/walk 1 mile as fast as you can		
<b>Flexibility Test</b>		
Sit and Reach - Using a sit-and-reach box constructed according to specifications in the <i>Personal Fitness</i> merit badge pamphlet, make four repetitions and record the fourth reach. This last reach must be held steady for 15 seconds to qualify. (Remember to keep your knees down.)		
<b>Strength Tests</b>	Record your performance on all three tests.	
a. Sit-ups	Record the number of sit-ups done correctly in 60 seconds. The sit-ups must be done in the form explained and illustrated in the <i>Personal Fitness</i> merit badge pamphlet.	
b. Pull-Ups	Record the total number of pull-ups completed correctly in 60 seconds. Be consistent with the procedures presented in the <i>Personal Fitness</i> merit badge pamphlet.	
c. Push-Ups	Record the total number of push-ups completed correctly in 60 seconds. Be consistent with the procedures presented in the <i>Personal Fitness</i> merit badge pamphlet..	
<b>Body Composition Test</b>	Have your parent, counselor, or other adult take and record the following measurements:	
a. Right Arm Circumference	Circumference of the right upper arm, midway between the shoulder and the elbow, with the arm hanging naturally and not flexed..	
b. Shoulder Circumference	Shoulders, with arms hanging by placing the tape measure 2 inches below the top of the shoulders around the arms, chest, and back after breath expiration..	
c. Chest Circumference	Chest, by placing the tape under the arms and around the chest and back at the nipple line after breath expiration..	
d. Abdomen Circumference	Abdomen circumference at the navel level (relaxed).	
e. Right Thigh Circumference	Circumference of the right thigh, midway between the hip and knee, and not flexed..	



"Sit and reach" to measure lower-back flexibility.



If possible, have the same person take the measurements whenever they are recorded.

7. Outline a 12-week physical fitness program using the results of your physical fitness tests. Be sure your program incorporates the endurance, intensity, and warm-up guidelines discussed in the *Personal Fitness* merit badge pamphlet. Before beginning your exercises, have the program approved by your counselor and parents.

Warm-up: \_\_\_\_\_

Aerobic Exercises: \_\_\_\_\_

Strength Exercises: \_\_\_\_\_

Flexibility Exercises: \_\_\_\_\_

Cool-Down: \_\_\_\_\_

8. Complete the physical fitness program you outlined in requirement 7. Keep a log of your fitness program activity (how long you exercised; how far you ran, swam, or biked; how many exercise repetitions you completed; your exercise heart rate; etc.). Repeat the aerobic fitness, muscular strength, and flexibility tests every two weeks and record your results. After the 12th week, repeat the three tests, record your results, and show improvement in each one. For the body composition test, compare and analyze your pre-program and post-program body composition measurements.

FITNESS MEASUREMENTS

Test Results	Initial Results	12 Week Goals	Week 2	Week 4	Week 6	Week 8	Week 10	Week 12	Change
<b>Date</b>									
9 Min. Run/walk <b>-or-</b> 1 mi. Run/walk (time)									
Flexibility Reach (cm)									
Sit-ups in 60 sec									
Pull-ups in 60 sec									
Push-ups in 60 sec									

BODY COMPOSITION TEST

Measurements	Initial Results	Week 12	Change	Compare and analyze your pre-program and post-program body composition measurements.
Right upper arm	inches	inches	inches	
Shoulders	inches	inches	inches	
Chest	inches	inches	inches	
Abdomen	inches	inches	inches	
Right thigh	inches	inches	inches	

Discuss the meaning and benefit of your experience, and describe your long-term plans regarding your personal fitness.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Find out about three career opportunities in personal fitness.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Pick one and find out the education, training, and experience required for this profession.

Career: \_\_\_\_\_

Education: \_\_\_\_\_

Training: \_\_\_\_\_

Experience: \_\_\_\_\_

Discuss what you learned with your counselor, and explain why this profession might interest you. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Note: There is an editorial error in the merit badge pamphlet, regarding the Strength Tests the Scout must do in requirements 6 and 8. In the text of the pamphlet, and in the current edition of Boy Scout Requirements, the Scout is told to record his performance on all three tests (Sit-ups, Push-ups, and Pull-ups). This was a change made in 2006/2007. In the table on page 72 of the black and white (33286B) pamphlet, and the same table in the color (35927) edition, the table was not changed to reflect the changed requirement, and the Scout is incorrectly directed to do the Sit-ups and either Push-ups or Pull-ups.*

**Requirement resources can be found here:**  
[http://www.meritbadge.org/wiki/index.php/Personal\\_Fitness#Requirement\\_resources](http://www.meritbadge.org/wiki/index.php/Personal_Fitness#Requirement_resources)



**SAMPLE FITNESS PROGRAM ACTIVITY LOG (Page 1)**

Day	Fitness Program Activity & Notes	Distance	Duration	Repetitions	Heart Rate
Week 1					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Week 2					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Week 3					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Week 4					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**SAMPLE FITNESS PROGRAM ACTIVITY LOG (Page 2)**

Day                      Fitness Program Activity & Notes                      Distance                      Duration                      Repetitions                      Heart Rate

Week 5

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Week 6

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Week 7

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Week 8

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**SAMPLE FITNESS PROGRAM ACTIVITY LOG (Page 3)**

Day                      Fitness Program Activity & Notes                      Distance                      Duration                      Repetitions                      Heart Rate

Week 9

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Week 10

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Week 11

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Week 12

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

## Important excerpts from the [‘Guide To Advancement’](#), No. 33088:

Effective January 1, 2012, the ‘Guide to Advancement’ (which replaced the publication ‘Advancement Committee Policies and Procedures’) is now the official Boy Scouts of America source on advancement policies and procedures.

- **[ Inside front cover, and 5.0.1.4 ] — Unauthorized Changes to Advancement Program**  
**No council, committee, district, unit, or individual has the authority to add to, or subtract from, advancement requirements.**  
(There are limited exceptions relating only to youth members with disabilities. For details see section 10, “Advancement for Members With Special Needs”.)
- **[ Inside front cover, and 7.0.1.1 ] — The [‘Guide to Safe Scouting’](#) Applies**  
Policies and procedures outlined in the ‘Guide to Safe Scouting’, No. 34416, apply to all BSA activities, including those related to advancement and Eagle Scout service projects. [Note: Always reference the online version, which is updated quarterly.]
- **[ 7.0.3.1 ] — The Buddy System and Certifying Completion**  
Youth members must not meet one-on-one with adults. Sessions with counselors must take place where others can view the interaction, or the Scout must have a buddy: a friend, parent, guardian, brother, sister, or other relative —or better yet, another Scout working on the same badge— along with him attending the session. When the Scout meets with the counselor, he should bring any required projects. If these cannot be transported, he should present evidence, such as photographs or adult certification. His unit leader, for example, might state that a satisfactory bridge or tower has been built for the Pioneering merit badge, or that meals were prepared for Cooking. If there are questions that requirements were met, a counselor may confirm with adults involved. Once satisfied, the counselor signs the blue card using the date upon which the Scout completed the requirements, or in the case of partials, initials the individual requirements passed.
- **[ 7.0.3.2 ] — Group Instruction**  
It is acceptable—and sometimes desirable—for merit badges to be taught in group settings. This often occurs at camp and merit badge midways or similar events. Interactive group discussions can support learning. The method can also be attractive to “guest experts” assisting registered and approved counselors. Slide shows, skits, demonstrations, panels, and various other techniques can also be employed, but as any teacher can attest, not everyone will learn all the material.  
  
There must be attention to each individual’s projects and his fulfillment of *all* requirements. We must know that every Scout — actually and *personally*— completed them. If, for example, a requirement uses words like “show,” “demonstrate,” or “discuss,” then every Scout must do that. It is unacceptable to award badges on the basis of sitting in classrooms *watching* demonstrations, or remaining silent during discussions. Because of the importance of individual attention in the merit badge plan, group instruction should be limited to those scenarios where the benefits are compelling.
- **[ 7.0.3.3 ] — Partial Completions**  
Scouts need not pass all requirements with one counselor. The Application for Merit Badge has a place to record what has been finished — a “partial.” In the center section on the reverse of the blue card, the counselor initials for each requirement passed. In the case of a partial completion, he or she does not retain the counselor’s portion of the card. A subsequent counselor may choose not to accept partial work, but this should be rare. A Scout, if he believes he is being treated unfairly, may work with his Scoutmaster to find another counselor. An example for the use of a signed partial would be to take it to camp as proof of prerequisites. Partials have no expiration except the 18th birthday.