**Unit 6 Programming Pilates matwork**

**Unit accreditation number: H/602/5325**

**Your Name Date**

**Client interview**

|  |  |  |  |  |  |  |  |  |  |  |  |
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| **Personal information** | | | | | | | | | | | |
| **Age:** | | | **Gender:** | | | **Occupation:** | | | **Hours worked per week:** | | |
| **Lifestyle information** | | | | | | | | | | | |
| **Smoker:** | | | **Cigarettes per day:** | | | **Alcohol:** | | | **Units per week:** | | |
| **Overview of diet: (five a day / breakfast / 6-8 glasses of water a day)** | | | | | | | | | | | |
| **Currently active?** | | | **Minutes per week:** | | | **Type of activity:** | | | | | |
| **Current fitness (Client’s perception)**  **(Please tick)** | | | | | | | | | | | |
| **1**  **Low** | **2** | **3** | | **4** | **5** | | **6** | **7** | **8** | **9** | **10**  **High** |
|  |  |  | |  |  | |  |  |  |  |  |
| **Activity likes and preferences:** | | | | | | | | | | | |
| **Activity dislikes and reasons:** | | | | | | | | | | | |
| **Motivation and readiness to participate**  **(Please tick)** | | | | | | | | | | | |
| **1**  **Low** | **2** | **3** | | **4** | **5** | | **6** | **7** | **8** | **9** | **10**  **High** |
|  |  |  | |  |  | |  |  |  |  |  |
| **Barriers to participation (Perceived or actual)**  **and a strategy to overcome** | | | | | | | | | | | |
| **Barrier:** | | | | | | | **Strategy:** | | | | |
| **Posture and alignment**  **Please include your postural analysis sheet as part of your portfolio** | | | | | | | | | | | |
| **Neck, scapula and upper spine:** | | | | | | | | | | | |
| **Pelvis and lumbar spine:** | | | | | | | | | | | |
| **Other:** | | | | | | | | | | | |
| **Functional ability:** | | | | | | | | | | | |
| **Medical history** | | | | | | | | | | | |
| **Medical history**  **CHD risk factors that may affect participation (summary of PAR-Q):** | | | | | | | | | | | |

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| **Personal goals** |
| **General health and fitness:**  **Physiological:**  **Psychological:**  **Social:**  **Functional:** |
| **SMART goals**  **You may use the separate SMART goal setting worksheet if you prefer** |
| **Short term:**  ***S***  ***M***  ***A***  ***R***  ***T*** |
| **Medium term:**  ***S***  ***M***  ***A***  ***R***  ***T*** |
| **Long term:**  ***S***  ***M***  ***A***  ***R***  ***T*** |

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| **Assessor’s feedback:** |