

## AIR FORCE ROTC PRE-PARTICIPATORY SPORTS PHYSICAL

|  |  |   |         |
|--|--|---|---------|
| 1. CADET/APPLICANT NAME  |  | 2. AFROTC DETACHMENT  |         |
| <b>MEDICAL AUTHORITY:</b> Measure height and weight of cadet/applicant. Compare results to AF standards listed on reverse, check block 7 and certify as requested below.<br><b>AFROTC CADRE:</b> If cadet/applicant exceeds AF weight standards, conduct a Body Fat Measurement IAW DoDI 1308.3.   |  |   |         |
| 3. CADET/APPLICANT MEASUREMENTS  |  | HEIGHT  | WEIGHT  |
| 4. AIR FORCE WEIGHT STANDARDS<br>(found on reverse)  |  | MINIMUM   | MAXIMUM |
| 5. BODY FAT MEASUREMENT  | 6. BODY FAT STANDARDS:<br>FEMALE - 26%<br>MALE - 18% | 7. CHECK APPLICABLE BOX<br><input type="checkbox"/> IS WITHIN AIR FORCE WEIGHT STANDARDS<br><input type="checkbox"/> EXCEEDS AIR FORCE WEIGHT STANDARDS<br><input type="checkbox"/> IS BELOW AIR FORCE WEIGHT STANDARDS |         |
| 8. MEDICAL AUTHORITY: PLEASE REVIEW THE ABOVE INFORMATION. CONDUCT COUNSELING BELOW IN APPLICABLE AREAS, AND SIGN.<br>I, (print name) _____, HAVE EXAMINED THIS CADET/APPLICANT AND REVIEWED HIS/HER MEDICAL HISTORY. THE FOLLOWING ARE THE RESULTS:   |  |   |         |
| 9. (IF CADET/APPLICANT IS BELOW AIR FORCE WEIGHT STANDARDS)<br>I CERTIFY THIS CADET/APPLICANT'S LEAN BODY MASS POSES NO HEALTH RISK; NO SIGNS OF EATING DISORDERS EXIST. I HAVE DISCUSSED THE IMPORTANCE OF NUTRITION AND WEIGHT MANAGEMENT. _____ (Medical Authority Initials)  |  |   |         |
| 10. (IF CADET/APPLICANT EXCEEDS AIR FORCE WEIGHT STANDARDS)<br>I HAVE DISCUSSED APPROPRIATE AND SAFE WEIGHT LOSS WITH THE CADET/APPLICANT. _____ (Medical Authority Initials)  |  |   |         |
| 11. (FOR ALL CADETS/APPLICANTS)<br>I DID / DID NOT (please circle) FIND MEDICAL CONDITION(S) OR PHYSICAL IMPAIRMENT(S) THAT WOULD PRECLUDE THIS CADET/APPLICANT FROM PARTICIPATING IN A RIGOROUS PHYSICAL TRAINING PROGRAM. IF A MEDICAL CONDITION/PHYSICAL IMPAIRMENT EXISTS THAT MAY PRECLUDE THE INDIVIDUAL FROM PARTICIPATING, PLEASE EXPLAIN: |  |   |         |
| EXAMINATION DATE   |  | PHYSICIAN OR MEDICAL AUTHORITY SIGNATURE  |         |
|  |  |   |         |
| AFROTC CADRE: REVIEW THE INFORMATION ENTERED ABOVE AND SIGN BELOW:   |  |   |         |
| DATE   |  | AFROTC CADRE SIGNATURE  |         |
|  |  |   |         |

AFROTC FORM 28, 20180423  
AFI 36-2905\_AFROTCSUP



**ACCESSION HEIGHT AND WEIGHT STANDARDS & BODY FAT MEASUREMENT (BFM) STANDARDS**  
 (Per DoDI 1308.3, *DoD Physical Fitness and Body Fat Programs Procedures*)

| HEIGHT (INCHES) | POUNDS                  |                           |
|-----------------|-------------------------|---------------------------|
|                 | MINIMUM (BMI = 19 kg/m) | MAXIMUM (BMI = 25.0 kg/m) |
| 58              | 91                      | 119                       |
| 59              | 94                      | 124                       |
| 60              | 97                      | 128                       |
| 61              | 100                     | 132                       |
| 62              | 104                     | 136                       |
| 63              | 107                     | 141                       |
| 64              | 110                     | 145                       |
| 65              | 114                     | 150                       |
| 66              | 117                     | 155                       |
| 67              | 121                     | 159                       |
| 68              | 125                     | 164                       |
| 69              | 128                     | 169                       |
| 70              | 132                     | 174                       |
| 71              | 136                     | 179                       |
| 72              | 140                     | 184                       |
| 73              | 144                     | 189                       |
| 74              | 148                     | 194                       |
| 75              | 152                     | 200                       |
| 76              | 156                     | 205                       |
| 77              | 160                     | 210                       |
| 78              | 164                     | 216                       |
| 79              | 168                     | 221                       |
| 80              | 173                     | 227                       |