



P.E. STARTING ENQUIRY

Name and group: _____

1. **Distance** from your home to school _____ km.
2. Do you have a bus card? YES / NO (circle)
3. Do you have a bicycle for traveling during the school day? YES / NO
4. Do you have a bicycling helmet? YES / NO
5. From which side do you play floorball / hockey etc.? RIGHT / LEFT
6. Can you swim? NO / YES I am able to swim a) 10-50 m b) 50-100 m c) over 100 m
7. Are you forbidden to dance due to a religious code? NO / YES, because: _____
8. Do you have the following for winter sports? (Check if you do)
I have downhill skis _____, snowboard _____, classic cross-country skis _____,
skating cross-country skis _____, ice skates _____.
9. I have trained downhill skiing a lot _____, a bit _____, not at all _____.
10. Shoe size _____.
11. Do you have a **condition** that might affect you during P.E. classes
NO / YES, description?
12. How would you like this condition to be taken into account in P.E.?
13. What are your main hobbies and how much do you spend weekly doing them?
14. How do you like sports and exercise in general? How about P.E. in school?
15. What kind of goals do you set for yourself in P.E.? What would you like to learn especially?
16. What kind of wishes do you have for your teacher, concerning P.E. classes?

Thank you for your reply! Have a nice semester. ☺