

GEMS ID

Initials



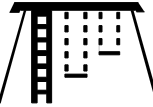



Date of Evaluation

 month day year

Available at [http://kidsnutrition.org/faculty/Survey_documents/GEMS\(2001-2\).htm](http://kidsnutrition.org/faculty/Survey_documents/GEMS(2001-2).htm)

GEMS Activity Questionnaire

Part I INSTRUCTIONS: For each activity listed below, think about whether you did that activity yesterday and check the correct box. Then, think how often you usually do that activity and check the box that best fits how you usually do that activity.

A. YESTERDAY, I ...					B. USUALLY, I ...		
Activity							
1. Bicycling		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
2. Exercise: push-ups, sit-ups, jumping jacks		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
3. Climbing on playground equipment		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
4. Basketball		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
5. Baseball, Softball		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
6. Football		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>

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A. YESTERDAY, I ...

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7. Soccer		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
8. Volleyball		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
9. Racket Sports: badminton, tennis		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
10. Ball Playing: four square, dodge ball, kickball, frisbee		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
11. Games: chase, tag, hopscotch		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
12. Outdoor Play: climbing trees, hide & seek		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
13. Water Play (swimming pool or lake)		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
14. Swimming Laps (swim team)		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>

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15. Jump Rope		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
16. Dance		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
17. Outdoor Chores: mowing, raking, gardening		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
18. Indoor Chores: mopping, vacuuming, sweeping		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
19. Mixed: walking, running		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
20. Walking		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
21. Running		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
22. Gymnastics		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>

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A. YESTERDAY, I ...

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23. Skateboard- ing / Skating / Rollerblading		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
24. Hiking		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
25. Weight Lifting / Strength Training		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
26. Martial Arts		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
27. Yoga		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
28. Cheerleading / Drill Team		None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>
29. Other _____	?	None <input type="checkbox"/>	Less than 15 minutes <input type="checkbox"/>	15 minutes or more <input type="checkbox"/>	None <input type="checkbox"/>	A little <input type="checkbox"/>	A lot <input type="checkbox"/>

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month

day

year

Part II INSTRUCTIONS: For each activity listed below, think about whether you did that activity yesterday and, if so, how much time you spent doing the activity. Please check the box that best fits how much time you spent doing each activity **YESTERDAY**.

Activity						
30. Watch TV, Videos		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
31. Computer Games, Video games		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
32. Arts and Crafts		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
33. Play Board Games		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
34. Homework, Reading		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
35. Talking on the phone, hanging out with friends		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
36. Listening to Music, playing an Instrument		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>

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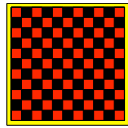



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Part III INSTRUCTIONS: For each activity listed below, think about whether you usu-
ally do that activity. If you usually do that activity, please check the box that best fits
 how often you usually spend doing that activity.

USUALLY.

Activity						
37. Watch TV, Videos		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
38. Computer Games, Video games		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
39. Arts and Crafts		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
40. Play Board Games		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
41. Homework, Reading		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
42. Talking on the phone, hanging out with friends		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>
43. Listening to Music, playing an Instrument		None <input type="checkbox"/>	Less than 30 minutes <input type="checkbox"/>	30 minutes – 1 hour <input type="checkbox"/>	1-3 hours <input type="checkbox"/>	More than 3 hours <input type="checkbox"/>