### AIR FORCE ROTC PRE-PARTICIPATORY SPORTS PHYSICAL

1. **CADET/APPLICANT NAME**

2. **AFROTC DETACHMENT**

**MEDICAL AUTHORITY:** Measure height and weight of cadet/applicant. Compare results to AF standards located below.

**AFROTC CADRE:** If cadet/applicant exceeds AF weight standards, conduct a Body Fat Measurement IAW 1308.3, then check the applicable block.

3. **CADET/APPLICANT MEASUREMENTS**

4. **AIR FORCE WEIGHT STANDARDS**
   - **HEIGHT**
   - **WEIGHT**

   **Reference Tables on Page 2**

5. **BODY FAT MEASUREMENT**
   - MALES: WAIST - NECK
   - FEMALES: WAIST + HIP - NECK

   **Note:** To be done if candidate exceeds maximum AF weight

6. **CHECK APPLICABLE BOX**
   - [ ] IS WITHIN AIR FORCE WEIGHT STANDARDS
   - [ ] EXCEEDS AIR FORCE WEIGHT STANDARDS
   - [ ] IS BELOW AIR FORCE WEIGHT STANDARDS

**MEDICAL AUTHORITY CERTIFICATION**

7. **(FOR MEDICAL AUTHORITY):** Please review the above information. Conduct counseling below in applicable areas, and sign at the bottom.

   I, (print name) ________________, have examined this cadet/applicant and reviewed his/her medical history. The following are the results:

8. **(IF CADET/APPLICANT IS BELOW AIR FORCE WEIGHT STANDARDS)**

   I certify this cadet/applicant's lean body mass poses no health risk. No signs of anorexia or bulimia exist. I have discussed the importance of nutrition and weight management. (Medical Authority Initials)

9. **(FOR CADET/APPLICANT EXCEEDS AIR FORCE WEIGHT STANDARDS)**

   I have discussed appropriate and safe weight loss with the cadet/applicant. (Medical Authority Initials)

10. **(FOR ALL)**

    I found / did not find (please circle one) medical condition(s) or physical impairment(s) that would preclude this cadet/applicant from participating in a rigorous physical training program.

11. **NOTE:** If a medical condition/physical impairment exists that may preclude the individual from participating, please explain.

### PHYSICIAN OR MEDICAL AUTHORITY SIGNATURE

### EXAMINATION DATE

AFROTC FORM 28, 20080422
# Maximum and Minimum Air Force Allowable Weight Standards

## Table 1: Maximum Allowable Weights for BMI of 27.5 (Regardless of Age) (58 - 80 Inches)

| Height (Inches) | 58  | 59  | 60  | 61  | 62  | 63  | 64  | 65  | 66  | 67  | 68  | 69  | 70  | 71  | 72  | 73  | 74  | 75  | 76  | 77  | 78  | 79  | 80  |
|----------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Maximum Weight (Pounds) | 131 | 136 | 141 | 145 | 150 | 155 | 160 | 165 | 170 | 175 | 180 | 186 | 191 | 197 | 202 | 205 | 214 | 220 | 225 | 231 | 237 | 244 | 250 |

## Table 2: Minimum Allowable Weights for BMI of 19.0 (58 - 80 Inches)

| Height (Inches) | 58  | 59  | 60  | 61  | 62  | 63  | 64  | 65  | 66  | 67  | 68  | 69  | 70  | 71  | 72  | 73  | 74  | 75  | 76  | 77  | 78  | 79  | 80  |
|----------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Maximum Weight (Pounds) | 91  | 94  | 97  | 100 | 104 | 107 | 110 | 114 | 117 | 121 | 125 | 128 | 132 | 136 | 140 | 144 | 148 | 152 | 156 | 160 | 164 | 168 | 172 |