

VIRGINIA MILITARY INSTITUTE  
**BODY FAT MEASUREMENT FORM**  
**REQUIRED FOR ALL APPLICANTS**

**TO BE COMPLETED BY A HEALTH PROFESSIONAL, CERTIFIED FITNESS PROFESSIONAL OR HIGH SCHOOL ATHLETIC TRAINER**

**THE SAME MEASUREMENT IS TAKEN 3 SEPARATE TIMES IN A ROW TO IMPROVE ACCURACY**

Applicant's Name: \_\_\_\_\_

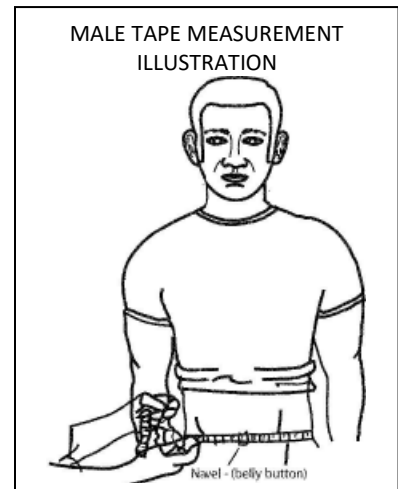
**Male**

Weight: \_\_\_\_\_(pounds)

Waist #1: \_\_\_\_\_(to the nearest ½ inch)

Waist #2: \_\_\_\_\_(to the nearest ½ inch)

Waist #3: \_\_\_\_\_(to the nearest ½ inch)



**Tape measure is held at the level of the belly button**

**Female**

Weight: \_\_\_\_\_(pounds)

Waist #1: \_\_\_\_\_(to the nearest ½ inch)

Waist #2: \_\_\_\_\_(to the nearest ½ inch)

Waist #3: \_\_\_\_\_(to the nearest ½ inch)



SIGNATURE: \_\_\_\_\_

HEALTH PROFESSIONAL, CERTIFIED FITNESS PROFESSIONAL OR HIGH SCHOOL ATHLETIC TRAINER

Date: \_\_\_\_\_