SHOE PROFILE

Note if your shoes are brand new you will need to wear them for several classes before turning in your shoe profile. Your shoe profile is due no later than the third week of the semester. If you get new shoes during the semester please let your instructor know.

NAME_______________________________       CLASS____________________________
(Please specify day and time)

1. Brand Name (e.g. Reebok, Nike, etc.) __________________  model _____________________

2. Why did you buy these particular shoes? ___________________________________________

3. How long have you been wearing these shoes?
   a. one month or less    c. 3-6 months
   b. 3 months or less    d. over 6 months

4. Do you wear these shoes:
   a. only in aerobic classes   c. in class and around campus
   b. for aerobics and other exercise d. for daily wear

5. On a scale of 1 (poor) to 5 (excellent) how would you rate these shoes on:
   Forefoot shock absorption 1 2 3 4 5
   Lateral (side to side support) 1 2 3 4 5
   Fit and comfort 1 2 3 4 5
   Flexibility 1 2 3 4 5
   Weight of shoe 1 2 3 4 5

Instructor’s recommendation based on medical and shoe profile:

☐ See me       ☐ Proceed as recommended

☐ See me regarding your medical __________ ASAP. In the interim, use caution during activity.

☐ See me regarding your shoes ____________. New ones will likely be needed before the end of the semester.

☐ Medically cleared; however, new shoes are recommended. Consider impact when selecting movements. Also, monitor shoe support during lateral movements.

☐ Medically cleared. Do high or low impact based on fitness and skill. ____________________