

**SELF-EFFICACY AND SOCIAL SUPPORT INVENTORY**

Name: \_\_\_\_\_

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

**Directions: Select Yes or No for the first 8 items, then write a short response for the final 2 items.**

	YES	NO
I think I can ask an adult (teacher or family member) to help me find opportunities to continue fitness running.	<input type="checkbox"/>	<input type="checkbox"/>
I think I can ask a friend or family member to go for a run with me.	<input type="checkbox"/>	<input type="checkbox"/>
I think I have the skills I need to continue fitness running outside of physical education class.	<input type="checkbox"/>	<input type="checkbox"/>
I think I have the knowledge I need to improve my fitness running performance outside of physical education class.	<input type="checkbox"/>	<input type="checkbox"/>
I think I know where to find resources to learn more about fitness running.	<input type="checkbox"/>	<input type="checkbox"/>
I think I will participate in a fitness running event in the future if the opportunity is available.	<input type="checkbox"/>	<input type="checkbox"/>
I think I will feel comfortable participating in a fitness running event with my peers outside of physical education class.	<input type="checkbox"/>	<input type="checkbox"/>
I think activities like fitness running can help me stay active and healthy in the future.	<input type="checkbox"/>	<input type="checkbox"/>

**If you could choose between fitness running and other physical activity options, would you choose running? Why or why not?**

**Did you enjoy the challenges that you faced while learning fitness running skills and concepts? Why or why not?**