

United States Merchant Marine Academy Candidate Fitness Assessment Score Sheet

Test Date:		First Attempt □	Retake □
Applicant Name:			
Email Address:		Home State of Re	cord:
DOB:	Height:	(inches) Weight	t: (pounds
Name of Evaluator:			
Position / Title:		Phone:	
*Evaluator Signature:			
1. Basketball Throw (best of three	ee attempts will be	e submitted)	
1 st Throw: (fe	eet)		
2 nd Throw:			
3 rd Throw:			
2. Pull-Ups (men or women):	(repetitio	ns)	
<u>OR</u>			
Flexed-Arm Hang (women's op	ption):	(nearest tenth of a se	cond)
3. Shuttle Run (best of two attemptions)	ots will be submitt	ed)	
1 st Run: (neare	est tenth of a secon	nd)	
2 nd Run:			
4. Crunches : (repetiti	ions)		
5. Push-Ups : (repetiti	ions)		
6. Mile-Run: : (1	minutes : seconds)	

^{*}This form must be submitted by an approved evaluator directly into the USMMA Evaluator Portal. More information on the Candidate Fitness Assessment is available at https://www.usmma.edu/admissions.