

Personalized Running Gait Assessment Form

Basic Information

Full Name

Age

Date

Gender

Height (cm)

Weight (kg)

Running History

Running Experience (years)

Average Weekly Distance (km)

Usual Running Terrain

Injury & Pain History

Current or Previous Injuries (describe)

Area(s) of Pain During/After Running

Running Goals

What are your current running goals?

Gait Observation

Describe your stride (if known)

Foot Strike Pattern

Estimated Running Cadence (steps/min)

Additional Comments/Observations