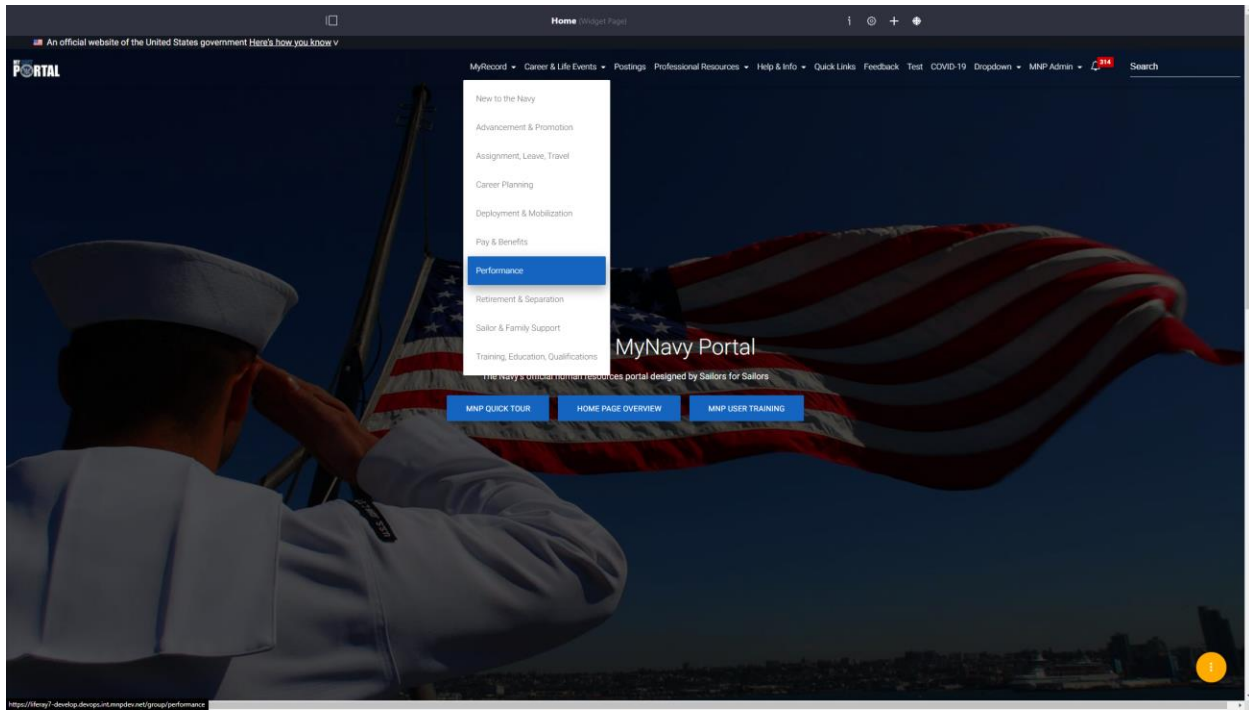
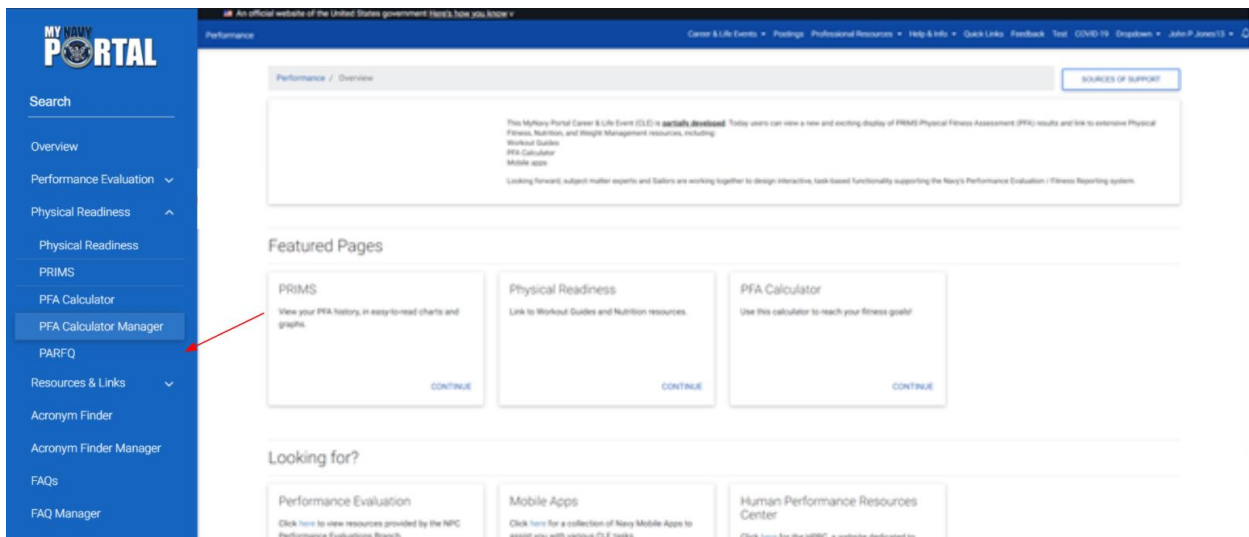


How To: Submit a PARFQ

To submit a PARFQ, log onto MyNavyPortal at my.navy.mil. Click on the Career & Life Events item at the top and select “Performance.”



On the left-hand side, click “Physical Readiness,” then select “PARFQ” from the dropdown options.



On this page, you can see your personal information. If any of the information is incorrect, go to My Record to submit an inquiry. Select a cycle for your submission, keeping in mind that only one PARFQ can be submitted per cycle. Select Next.

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PHYSICAL ACTIVITY RISK FACTOR QUESTIONNAIRE (PARFQ)

NAVPERS 6110/3 (Rev. 07-2019) PREVIOUS EDITIONS WILL BE USED
Supporting Directive OPNAVINST 6110.1J

Privacy Act Statement

AUTHORITY: 10 U.S.C. 5013. Secretary of the Navy; OPNAVINST 6110.1J, Physical Readiness Program.

PRIMARY PURPOSE: The Physical Activity Risk Factor Questionnaire (PARFQ) is a self-screening tool required of all Navy members prior to participating in the semi-annual Physical Fitness Assessment (PFA). The form assists commands and medical personnel in identifying risk factors or changes in a member's health status since the completion of the annual Periodic Health Assessment (PHA).

ROUTINE USES: Disclosures are permitted under 5 U.S.C. 552a(b), Privacy Act of 1974, as amended.

DISCLOSURE: Mandatory. Failure to fully disclose the requested information may inhibit the Navy's ability to properly assess your physical activity risk factors and may subject you to administrative actions.

Personal Information

PHA Date: 25 Oct 2021

Name: Doe, John A **Gender:** Male **Birthday:** 01-Jan-1996

Cycle for Submission: 1-20XX

There can only be one PARFQ submission per cycle. After your submission, you cannot make any changes to the form. The questionnaire is opened 10 weeks before the start of the cycle and closed the last day of that cycle.

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As you answer questions, additional questions may appear based on your responses.

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MNP / Physical Activity Risk Factor Questionnaire (PARFQ) SOURCES OF SUPPORT

PHYSICAL ACTIVITY RISK FACTOR QUESTIONNAIRE (PARFQ)

NAVPERS 6110/3 (Rev. 07-2019) PREVIOUS EDITIONS WILL BE USED
Supporting Directive OPNAVINST 6110.1J

Do any of the following apply to you?

- You are pregnant, or have reason to believe you could be pregnant.
- You gave birth within the past 9 months.
- You are currently undergoing in vitro fertilization (IVF) treatment, or have undergone IVF within the past 90 days.

Yes No

Did you VALIDATE or fully participate (i.e., body composition assessment (BCA), curl-ups, push-ups, cardio) in the last PFA cycle?

Yes No

Is your PHA out of date (i.e., more than 1 year from your medical in-processing exam or your last PHA)?

Yes No

Have you experienced any of these following symptoms/problems since the last PFA cycle that were NOT evaluated by the HCP?

- Unexplained chest discomfort
- Unusual or unexplained shortness of breath

When there are no more questions, a submit button will appear. Review your responses for accuracy, then click "Submit." You will receive a confirmation email.

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Have you experienced any of these following symptoms/problems since the last PFA cycle that were NOT evaluated by the HCP?

- Unexplained chest discomfort
- Unusual or unexplained shortness of breath
- Dizziness, fainting, or blackouts associated with exertion
- Other medical issues (including bone and joint problems) that would keep you from safety participating in the PRT.

Yes No

Review and submit this PARFQ. Schedule a medical appointment with primary HCP to obtain a medical evaluation prior to the PRT. Authorized medical department representative (AMDR)/HCP will endorse PARFQ after a health determination is confirmed.

[SUBMIT](#)

For your records, you can export your completed PARFQ as well as a medical waiver form to bring to your medical appointment if a medical evaluation is required.

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PARFQ Submitted

You have successfully submitted this cycle's PARFQ. You can save or print your answers by using the EXPORT/PRINT MY PARFQ button below. To obtain a medical waiver, click the EXPORT/PRINT MY MEDICAL WAIVER button to save or print a medical waiver with your information.

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To view your saved documents, be sure to use the Adobe PDF Viewer.

PHYSICAL ACTIVITY RISK FACTOR QUESTIONNAIRE (PARFQ)

PARFQ Submitted

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Export/Print My PARFQ ✕

Use Adobe's PDF Viewer to view and edit the PDF version of the Physical Activity Risk Factor Questionnaire (PARFQ). Check the "Help & Info" option in the navigation bar for a link to download Adobe's PDF Viewer.

[EXPORT/PRINT MY PARFQ](#)