

MOUNT OLIVE TOWNSHIP POLICE

204 FLANDERS DRAKESTOWN ROAD BUDD LAKE, NJ 07828 TEL: (973) 691-0850 FAX: (973) 691-3243

STEPHEN W. BEECHER

Chief of Police

Physician's Referral Form

Mt. Olive Township Police Health/Fitness Assessment and Evaluation

	r	nay participate in a health/fitness
pre-employmen	t test for the	police department.
	the exercise	will consist of the vigorous exercises listed below and indicate whether the candidate may or no.
Yes	No	
		<u>Vertical Jump Test:</u> To measure the explosive power of an individual for pursuit tasks such as jumping and vaulting.
		1 Repetition Maximum Bench Press: To measure the amount of force the upper body can generate.
		1 Minute Sit-ups: To measure the muscular endurance of the abdominal muscles.
		1 Minute Push-ups: To measure the muscular endurance of the upper body muscles in the shoulders, chest and back of the upper arms.
		1.5 Mile Run: To measure cardiovascular endurance.
		300 Meter Run: To measure anaerobic capacity.

Is the candidate on any medic cause any health problems or	ations where participation in the required vigorous exe reactions?	rcises would
NoYes (
Does the candidate have any ply this testing?	prior existing medical condition or injury that could be	aggravated
NoYes 0	(If yes, please explain)	
I certify that this individual is	s fit to particpate in the aforementioned health/fitness t	est events.
Date:	_	
	e):	
Printed Name: _		
Address:		
Office Number:		

POLICE

MICHAEL T. SPITZER
Captain of Operations

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Informed Consent

The Health/Fitness Assessment that you will undergo will be composed of six events:

- 1. Vertical Jump Test
- 2. 1 Repetition Maximum Bench Press
- 3. 1 Minute Sit-ups
- 4. 1 Minute Push-ups
- 5. 1.5 Mile Run
- 6. 300 Meter Run

All events are job related and designed to measure a candidates general health and fitness. A candidates general health and fitness is directly related to how he/she would perform in the areas of foot pursuit, lifting of persons/objects, dragging persons or equipment, climbing, jumping, pushing disabled vehicles, use of force situations, and putting himself/herself over obstacles in emergency or pursuit situations which require agility skills, strength, coordination and good physcial condition.

All Candidates will be monitored throughout the test. If a person is not tolerating the stress, the activity will be stopped. Mild lightheadedness and muscle soreness may occur, but is not unusual and usually dissipates quickly. Risk of injuires is always possible in all physical activity, but is usually minimal and rare. Any injuries which do occur must be reported to your instructor immediately. Candidates should be familiar with their maximum bench press relative to free wieghts and an Olympic bar.

By signing the consent form you are acknowledging that you understand the program and the potential risks. You also agree to provide a physician's certification medically clearing you for the testing procedure.

You will not be tested if you do not have a completed physician's referral form on the date of testing.

Dated:	 	
Candidate:_		
Signature:_		