#### APPLICATION FOR POSITION OF POLICE OFFICER

Once all Paperwork has been turned in, your name will be added to the list for the exam. You will **not** receive anything in the mail reminding you of the test date.

#### **TESTING DATE & LOCATION:**

Sunday, May 21, 2017 at 9:00 AM promptly at:

Londonderry High School

295 Mammoth Road

Londonderry, NH

A PHYSICAL AGILITY TEST WILL BE HELD AT THE COMPLETION OF THE WRITTEN EXAM SO PLEASE DRESS ACCORDINGLY.

#### **NEW HAMPSHIRE FULL-TIME CERTIFIED APPLICANTS:**

You will be required to take the physical agility ONLY (written exam is waived).

PLEASE BRING A VALID LICENSE FOR
IDENTIFICATION PURPOSES TO BOTH THE WRITTEN
AND PHYSICAL AGILITY TESTS.

## LONDONDERRY POLICE DEPARTMENT WAIVER OF LIABILITY

I	_ do hereby certify, that I am physically fit to
participate in the Londonderry Police De	epartment's Physical Agility Test, Entry Level
Requirements for Police Officer.	
I further certify that a copy of the I	Londonderry Police Department's Physical Agility
Test, Entry Level Requirements has been pro-	rovided to me in advance, that I have reviewed the
Entry Level Requirements (copy attached) and	d there are no medical reasons that I am aware of or
have made the Londonderry Police Depa	artment aware of, that would prohibit me from
participating.	
I further understand that by partici	cipating in the Londonderry Police Department's
Physical Agility Test, and by signing this " $\underline{\mathbf{W}}$	Vaiver of Liability," I hold the Londonderry Police
Department, it's employees administering the	the test, and the New Hampshire Police Training
Academy, "Harmless from All Civil Actio	ons, and/or Medical Costs," arising from injuries
that might occur, during my participation in the	he Physical Agility Test.
I further agree to indemnify the	Londonderry Police Department, its employees
administering the test and the New Hampsh	aire Police Training Academy, for any and all cost
incurred, including attorney's fees, should I	or anyone representing my interests, file any civil
action to collect for injuries sustained during	my participation in the Physical Agility Test.
Date:	
	Signature of Participant
Date:	

#### PLEASE COMPLETE AND SUBMIT WITH APPLICATION

Witnessed By

# LONDONDERRY POLICE FITNESS TESTING STANDARDS

(35 PERCENTILE)

## MALES:

AGE	RUN	BENCH PRESS	SIT-UPS (in 60 seconds)	PUSH-UPS
18 – 29	12:53	.96 x weight	37	27
30 – 39	13:24	.86 x weight	33	21
40 – 49	14:07	.78 x weight	28	16
50 – 59	15:20	.70 x weight	22	11
60 – 69	17:11	.65 x weight	18	9
70 – 79	19:39	.65 x weight	18	9

### **FEMALES**:

AGE	RUN	BENCH	SIT-UPS	PUSH-UPS	
		PRESS	(in 60 seconds)	Modified	Full Body
18 – 29	15:14	.58 x weight	31	22	14
30 – 39	15:58	.52 x weight	24	17	10
40 – 49	16:46	.48 x weight	19	11	8
50 – 59	18:37	.43 x weight	12	10	
60 – 69	20:46	.41 x weight	5	4	
70 – 79	22:20	.41 x weight	5	4	