

TOMPKINS COUNTY
Law Enforcement Physical Fitness Test
Physician Certification Form

Candidate Name (please print): _____ has been a patient or has made me aware that they are required to compete in a Physical Fitness Test requiring the completion of events described upon this form. It is my medical judgment that the individual is physically fit and capable of undertaking the events described below.

Elements of the Test Battery

Although these elements may not be directly representative of the essential job functions to be performed by an entry-level police officer, the New York State Municipal Police Training Council has determined that such elements do measure the candidate's physiological capacity to learn and perform the essential job functions. The three components measured are muscular endurance (core body), muscular endurance (upper body) and cardiovascular capacity. The following is a brief description of the test items used to measure each component:

1. Sit-up Muscular Endurance (Core Body) – The score indicated below is the number of bent-leg sit-ups performed in one minute. **The trainer administering this test will count the sit-ups out loud until the completion of the one minute time limit.**
2. Push-up Muscular Endurance (Upper Body) – The score below is the number of full body repetitions that a candidate must complete **WITHOUT breaks and NO resting. The trainer administering this test will count the push-ups out loud.**
3. 1.5 mile run Cardiovascular Capacity- The score indicated below is calculated in minutes/seconds. The 1.5 mile run shall only be administered to such individuals who have successfully completed each of the other two elements of the test battery (sit-up and push-up). **Tompkins County does NOT allow for pace runners during the 1.5 mile run. When using a 400 meter track, it is not a simple 6 laps. The distance is expanded by 14 meters to convert to a full mile and one-half.**

AGE/SEX	TEST		
MALE	SIT-UP	PUSH-UP	1.5 MILE RUN
20-29	38	29	12:38
30-39	35	24	12:58
40-49	29	18	13:50
50-59	24	13	15:06
60+	19	10	16:46

AGE/SEX	TEST		
FEMALE	SIT-UP	PUSH-UP	1.5 MILE RUN
20-29	32	15	14:50
30-39	25	11	15:43
40-49	20	9	16:31
50-59	14	-	18:18
60+	6	-	20:16

The minimum scores for employment as an entry-level police officer as set forth above represent the fortieth (40th) percentile of fitness. If a candidate does not successfully score to the fortieth (40th) percentile of fitness for each of the elements of the test battery, the candidate shall not be deemed to have successfully completed the physical fitness screening test. Nothing herein shall preclude an administrator of such screening test from substituting an element of the test battery, which such administrator has determined and validated to accurately assess the candidate's physiological capacity to learn and perform essential job functions.

Physician's Signature: _____ Date: _____

Physician's Name and Address (Please Print): _____

Candidate Accident Waiver

WHEREAS, The Tompkins County Commissioner of Personnel has called an examination to be held for the position of Police Officer and/or Deputy Sheriff;

WHEREAS, I, _____, the undersigned residing at _____ have presented to Tompkins County Personnel my signed application to participate in this examination and have been informed that as part of the examination given for this position, it will be necessary for me to demonstrate my strength, endurance, and physical agility in a series of tests.

NOW, THEREFORE, I, for myself, my heirs, executors, administrators, or assigns hereby waive any or all claims against Tompkins County, any employee of Tompkins County, the administrator of this physical agility testing and any state agency or member thereof, now or hereafter to accrue for, on account of, because of any injury or damage that I may sustain because of, in connection with, or on account of this physical, strength and agility test and hereby release Tompkins County, any employee of Tompkins County, the administrator of this physical agility testing and any state agency or member thereof, from any and all liability or claim for damages for any injury or death occurring as a result of these tests.

You are NOT allowed to bring other people with you to the physical agility test. The only individuals at the test site should be the candidate(s), the certified physical fitness trainer, and a member of the Tompkins County Personnel Office.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this ____ day of _____ 2008.

CANDIDATE SIGNATURE: _____ PRINTED NAME: _____

PHYSICAL FITNESS SCREENING TEST DATE: _____

PHYSICAL FITNESS SCREENING TEST ADMINISTRATOR: _____

NOTE: CANDIDATES WHO APPEAR AT THE PHYSICAL FITNESS TEST WITHOUT A FULLY COMPLETED ORIGINAL OF THIS DOCUMENT WILL NOT BE PERMITTED TO PARTICIPATE AND WILL BE SUBJECT TO REMOVAL FROM THE ELIGIBLE LIST