

#### FITNESS TEST MEDICAL CERTIFICATE

Dear Physician: The following named individual has submitted an application to become a Police Officer with the **TIVERTON** Department. Candidate Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ \_\_\_\_\_Town/City: \_\_\_\_\_ Address: State: The TIVERTON Police Department and the Rhode Island Department of Public Safety/Municipal Police Training Academy (RIDPS/MPTA) requires each candidate to bring a completed Physical Fitness Test Certificate to the Physical Fitness Test before he/she will be allowed to participate in the test. A statement must be obtained from a licensed physician that the candidate is of sufficient physical conditioning to undergo a Physical Fitness test. The Fitness Test Medical Certificate must be completed within six (6) months of the Physical Fitness testing date. Attached to this form is a listing of the minimum physical fitness standards a candidate must attain. We ask that your evaluation be based upon these criteria. Thank you for your assistance. PHYSICIAN'S STATEMENT I have examined the above-named individual on \_\_\_\_ (Date) After reviewing each of the four (4) events, I find him/her to be of sufficient physical conditioning to allow the candidate to participate in the TIVERTON Police Department and RIDPS/MPTA Physical Fitness Test. Comments (if any): Physician's Signature (Please type or print:) Physician's Name: Address:

Telephone Number:

Effective January 1, 2013

# Physical Fitness Assessment 40th Percentile

# 1 Minute Push-Up

	Age<20	20-29	30-39	40-49	50-59
Male	29.0	29.0	24.0	18.0	13.0
Female	15.0	15.0	11.0	9.0	n/d

#### 1.5 Mile Run-Aerobic Power

	Age<20	20-29	30-39	40-49	50-59
Male	12:38	12:38	12:58	13:50	15:06
Female	14:50	14:50	15:43	16:31	18:18

## 1 Minute Sit-up test

	Age<20	20-29	30-39	40-49	50-59
Male	41.0	38.0	35.0	29.0	24.0
Female	32.0	32.0	25.0	20.0	14.0

### 300 Meter Run

	Age<20	20-29	30-39	40-49	50-59
Male	59.0	59.0	58.9	72.0	83.2
Female	71.0	71.0	79.0	94.0	n/d