NEW JERSEY CIVIL SERVICE COMMISSION

FIRE FIGHTER

MEDICAL CLEARANCE AND DISCLAIMER OF LIABILITY

You should ONLY make an appointment with a physician to have your medical clearance form completed and signed by the physician, certifying that you are physically capable of safely completing the PPT IF, AND ONLY IF, you receive a certification notice in the mail.

To Candidate: Provide the information requested below. Your physician must complete the next section of this form.

<table>
<thead>
<tr>
<th>Candidate’s Name:</th>
<th>Social Security Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title of Examination:</td>
<td>Symbol:</td>
</tr>
<tr>
<td>Jurisdiction:</td>
<td>Test Date:</td>
</tr>
</tbody>
</table>

NOTE: If you do not take the physical performance test within 180 days of your medical examination, you must obtain a new medical evaluation and complete a new disclaimer form. Additional copies are available on line at: www.state.nj.us/csc/forms

DO NOT WRITE BELOW --- FOR PHYSICIANS’ USE ONLY

NOTE TO PHYSICIAN: Please be advised that the person whose name appears above has been scheduled to take the physical performance test component of the New Jersey entry-level Fire Fighter examination. He/she will be required to participate in the strenuous physical activities as described on the reverse side of this form.

Physician’s Determination:

Can this candidate safely perform this physical performance test without injury? Yes No

If your answer is “No”, and the medical condition is temporary, please indicate the date after which the candidate may safely be tested. Candidate may be tested after (Date)

If your answer is “No”, and the medical condition is permanent, please indicate so by checking the box and stating the reason(s) below.

Physician's Remarks:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Physician’s Signature: ____________________________  N.J. Board of Medical Examiners License Number _______________________

Physician’s Office Address

____________________________________________________________________________________
____________________________________________________________________________________

Date: ____________________________

DO NOT WRITE BELOW --- TO BE COMPLETED AT THE TIME OF THE PHYSICAL PERFORMANCE TEST

DISCLAIMER OF LIABILITY

Participation in the firefighter physical performance test involves strenuous physical activities which require strength, endurance and speed. You will be allowed to participate in this test only if you have been examined by a physician who certifies that you can safely perform the physical performance test without injury. The State of New Jersey has no knowledge of your physical condition or abilities and must therefore rely upon your representation and the representation of your physician that you can perform this test without injury. Your signature below indicates that you understand that you are assuming all risk connected with participation in this test, that you have been informed that the State of New Jersey assumes no risk or responsibility for any injury incurred during or as a result of your participation in this test, and that no significant changes have occurred in your medical condition since you were examined by the physician whose signature appears above.

Candidate’s Signature ____________________________  Date ____________________________
SPECIAL NOTE: MEDICAL CLEARANCE REQUIREMENT: You will be required to obtain a clearance from your personal physician, stating that it is safe for you to participate in strenuous physical activities. This form must be completed by a physician and brought to the test center on the day of the physical performance examination. You will NOT be permitted to take the physical performance test without a properly completed and signed Medical Clearance. (See reverse side.)

FIRE FIGHTER PHYSICAL PERFORMANCE TEST

DESCRIPTION OF PHYSICAL PERFORMANCE TEST EVENTS

The physical performance test is designed to measure the degree of your physical fitness; emphasis is placed on physical strength, endurance (cardiovascular efficiency), and speed. The OBSTACLE COURSE consists of a single, continuous non-stop series of physical activities as described below. The LADDER CLimb and DARKENED MAZE CRAWL will involve a lesser number of activities. Your success in passing the PFT is determined by your ability to complete the OBSTACLE COURSE, LADDER CLimb, and DARKENED MAZE CRAWL within a set period of time. If you do not follow directions and the pattern of the obstacle course, you may be required to re-start the course from the beginning, with only a brief rest period.

OBSTACLE COURSE

You will be wearing a weighted vest (40 lbs.) throughout the OBSTACLE COURSE to simulate the protective clothing and gear worn at a fire scene. In the pictured outline of the course provided, the candidate is shown to start at the 2 1/2" hose drag in the upper right corner of the diagram. During the actual test, every candidate will begin at this point. The OBSTACLE COURSE is a timed event and candidates are to move continuously from start to finish as quickly as possible without running.

The obstacle course event begins by placing the end of a 2 1/2" supply line hose (55 lbs.) over one shoulder and across the chest. At the command “Ready, go,” the hose is dragged a distance of 75 feet. The candidate then drops the hose and proceeds to the fire hydrant.

The fire hydrant has two outlets, with a hydrant cap loosely screwed onto one of the outlets. The candidate must unscrew the cap for that outlet and attach it onto the other outlet to a hand tight position. The candidate then proceeds to the K-12 saw.

The candidate lifts the K-12 saw (30 lbs.) from its box and carries it 37 1/2 feet out and around the right side of a cone and returns the saw to the box from which it was originally taken. The candidate then proceeds to the simulated 24’ ladder fly raise.

Using a 3/8” rope, the candidate pulls downward on the rope in a controlled manner to raise a weight (42 lbs.) until it hits the top of the pulley from which the weight is suspended. The weight is then similarly lowered in a controlled manner until it rests in its starting position on the floor. The candidate then proceeds to the 50 pound high rise pack.

The candidate picks up the high rise pack (50 lbs.), using the shoulder strap or handgrip to support the weight. While carrying the high rise pack, the candidate proceeds to the stairs. Each climb and descent equals one cycle. The candidate must place a foot on each step and both feet on the ground at the completion of each cycle. The candidate completes 12 cycles before returning the high rise pack to its original location on the floor. The candidate then proceeds to the 1 3/4” hose.

The candidate picks up the nozzle end of the hose (50 lbs.), drapes the hose over the shoulder and across the chest, and drags it 62 1/2 feet to and around a vertical stanchion, and back 62 1/2 feet to the starting point. The candidate then proceeds to the 40 pound fire extinguisher.

Picking up the extinguisher (40 lbs.) with either hand,