



The following Release of Liability form must be completed by your doctor and submitted at the time you submit your application. If this form is not submitted along with your application, you will not be allowed to take the Physical Agility Test even if you pass the written exam as medical clearance is needed in order to participate in this test.

We recommend that you make an appointment with your doctor as soon as possible. Be advised that this is at your expense.

Please note that submitting this release does not entitle you to take the physical agility test unless you pass the written exam.

If you pass the written examination, you will be contacted via email, to receive your appointment for the Physical Agility Examination taking place on:

**Date: TBD
Time: TBD
Location: TBD
TBD**

***ANYONE ARRIVING AFTER THE SCHEDULED TIME WILL NOT BE ALLOWED TO TEST.**



RELEASE OF LIABILITY FORM 2022

PHYSICAL AGILITY/STRENGTH AND ENDURANCE TEST REQUIREMENTS

I, the undersigned physician, hereby certify _____, **(Print Applicant Name)** to engage in a series of evolutions for the purpose of determining his/her level of fitness/wellness.

I further certify that I have examined him/her and find no contraindications that would limit him/her from performing the following evolutions.

- Don Self-Contained Breathing Apparatus (SCBA)
- Aerial Climb
- Ladder Raise
- Hose Drag
- Smoke House
- Rescue Carry
- Hose carry and Standpipe Connection

Description of the Evolutions:

The physical agility will require an applicant to complete several specified evolutions in a given sequence. An orientation is conducted prior to testing.

Criteria for passing the exam:

The Physical Agility Test will consist of 7 evolutions. Each evolution must be successfully completed without any rest periods during each evolution or between evolutions. No running is allowed. Failure to successfully complete an evolution will constitute failure of the Physical Agility Test.

THE PHYSICAL AGILITY TEST IS DESIGNED TO TEST THE APPLICANTS ABILITY TO SUCCESSFULLY PERFORM ESSENTIAL JOB FUNCTIONS.

For the purpose of the Physical Agility Test, full firefighting protective equipment and protective clothing will be worn on all evolutions. Full firefighting equipment and protective clothing is defined as the following:

- Helmet
- Gloves
- Bunker Coat
- Bunker Pants
- Boots
- Suspenders
- Self-Contained Breathing Apparatus

NOTE: Air from SCBA tanks will be used during Tests 3 thru 7.

Test Components:

All applicants will be given an orientation and walk through. No one will be allowed to take the test unless they fully understand what is expected of them.

1. **SELF CONTAINED BREATHING APPARATUS (SCBA):** Applicant will don an SCBA by themselves. This simulates fire fighters having to don SCBAs when needed.
2. **AERIAL CLIMB:** The applicant, wearing SCBA and not using the air, will climb to the top of the fully extended aerial ladder. When applicant reaches the top of the ladder, applicant will touch a marker. The applicant will then descend the ladder to the starting point. This test is designed to check for acrophobia (fear of heights), and performance of firefighting rescue work above ground level.
3. **LADDER RAISE:** A twelve foot ladder will be used. With the ladder flat on the ground and the butt of the ladder against the base of the drill tower, the applicant will squat to lift the top of the ladder and upright the ladder flat against the wall of the drill tower. The applicant will pull the butt of the ladder one fourth (1/4) the distance of the ladder. applicant will face the ladder and check angle of ladder by placing the tips of the boots on the butt of the ladder. The applicant will then extend the arms in front of chest and place the hands on the rungs. After checking angle of ladder, the applicant will lift ladder and return ladder flat against the wall. With the butt of the ladder touching the base of the drill tower, applicant will lower the ladder by grabbing the rungs and using the hand over hand method until the last rung. The applicant will squat and lay the ladder on the ground. This test duplicates firefighters wearing SCBAs, setting up ladders, and lowering ladders at fire scenes.
4. **HOSE DRAG:** Two hundred (200) feet of charged 1 3/4" hose with nozzle will be connected to a fire truck. Hose will be laid on the ground as though it was just pulled from the fire truck. Applicant will pick up the nozzle and drag hose slightly beyond the one-hundred (100) feet mark. Applicant will slowly open the nozzle completely. Applicant will then operate nozzle from full fog to straight stream and then back to full fog. Applicant will close the nozzle slowly and then lay nozzle on the ground. This test simulates actual fire ground functions of dragging the hose and spraying different water patterns at fire scenes.
5. **SMOKE HOUSE:** Applicants' face piece (SCBA Mask) will be completely covered. Applicant will enter smoke house and exit through the rear door. The cover will be removed from face piece. This test simulates actual fire scenes where areas are so dark that firefighter's cannot see. This test is to check claustrophobia (fear of closed in spaces) and nyctophobia (abnormal dread of the night or darkness).
6. **RESCUE CARRY:** The applicant from a starting point will pick up a dummy weighing approximately one hundred sixty-five (165) pounds. Applicant will carry or drag dummy one hundred (100) feet. Applicant and dummy must be beyond the one hundred (100) foot mark before dummy is laid on the ground. This test simulates actual rescue of victim under emergency conditions.
7. **HOSE CARRY AND STANDPIPE CONNECTION:** One hundred (100) feet of 1 3/4" hose with nozzle connected to the hose will be used. Starting point will be at the ground level just outside entrance door of drill tower. Applicant will pick up hose and place it on the shoulder and walk up the inside stairs to the third floor. Hose will be laid on the third (3rd) floor. Applicant will simulate removing the standpipe cap. Applicant will simulate placing standpipe cap back on. Applicant will then shoulder the hose pack and walk down to ground level and place hose back in the starting position.

I certify that I have examined him/her and find no contraindications that would limit him/her from performing all of the above (pages 1 & 2) battery of exercise testing:

Applicant's Name:	* PLEASE PRINT
Physician's Name:	
Address:	
Office No.: ()	Fax No.: ()
Physician's Signature:	Date:

Note to Physician: Should you have any questions as to the protocol of any evolution, please contact Deputy Chief Ubaldo Perez at the Edinburg Fire Department by calling (956) 383-7691 or Belinda Torres, Civil Service Director at (956) 388-1873.