

ANNE ARUNDEL COUNTY FIRE DEPARTMENT
Veterans Highway, Millersville, MD 21108

**DOCTOR'S CERTIFICATION OF FITNESS TO PERFORM
PHYSICAL ABILITY TEST**

I have reviewed the attached eight elements of the Anne Arundel County Fire Department Candidate Physical Ability Test and certify that the candidate listed below is under my care and is able to prepare for and perform the elements of the test safely.

Candidate's Name: _____

Agency to Which
Application is Made: _____

Date of
Examination: _____
Expiration Date is six months from date of exam.

Doctor's Signature: _____

Name Printed/Typed: _____

Address & Phone #: _____

This form will expire six months from date of examination. Upon expiration, a new certification form must be completed before any further processing can be done.

***** IMPORTANT *****

Candidate, you must bring this form with you when you report for the Mentoring Program or Physical Ability Test. Without this form, you will not be tested.