

Fire Department

2011 Commerce Park Drive, Suite A Annapolis, Maryland 21401 Phone 410-222-8200 www.aacounty.org



Trisha L. Wolford Fire Chief

Physician's Certification of Fitness to Perform CPAT Mentoring Program and 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 Name: | |
|-------------------------|---------------------------------------|
| | |
| Agency of Application | : Anne Arundel County Fire Department |
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| | |
| (Expiration date is six | months from this date) |
| | |
| | |
| Physician Signature | |
| Thysician bignature | |
| Printed/Typed Physicia | n Name: |
| | |
| Office Address: | |
| | |
| - | |
| | |
| - | |
| Office Phone: | |
| | |

***** IMPORTANT *****

This form must be complete and on file or brought with you to the CPAT Mentoring Program or Test before you will be allowed to participate.