

Figure V-5.

APPLICANT CONSENT FOR A-PREP TESTING AND RELEASE OF INFORMATION

I, the undersigned, do hereby acknowledge:

1. My consent to perform an aerobic shuttle run and a simulated foot pursuit which consists of running 100 m (328 ft) while climbing stairs, climbing a 1.52 m (5 ft) fence, engaging in a “resistor control” simulation with a weight machine, performing an “arm restraint” simulation with a weight machine and dragging a 68 kg (150 lb) mannequin 15m (50 ft);
2. My consent to the tests being supervised by a qualified fitness appraiser who has been trained to administer these fitness assessment protocols;
3. My understanding that I may ask questions or request further information or explanation about the tests;
4. My understanding that there exists the possibility of certain changes occurring during and after my performance of the fitness tests including abnormal blood pressure, fainting, transient light-headedness, leg cramps, muscle strains, nausea, and, in rare instances, heart attacks, or heart rhythm disturbances;
5. My obligation to immediately inform the fitness appraiser of any unusual pain, discomfort, fatigue or any other symptoms that I incur during or after the testing;
6. My understanding that I may stop any further testing if I so desire and also that the testing may be terminated by the fitness appraiser;
7. That if I am over 40 years of age AND not accustomed to regular strenuous (vigorous) exercise, I have been cleared for participation in the fitness testing by a Certified Exercise Physiologist or by my physician who completed the Medical Clearance form and the PARmed-X form for that purpose;
8. That I do not have two or more of the following major coronary risk factors, or if I do, I have received medical clearance (PARmed-X) before reporting to participate in the A-PREP: family history of a heart attack or sudden death before 55 years of age; currently smoke cigarettes; have high blood pressure, have diabetes mellitus; have high blood cholesterol or work in a sedentary occupation and am physically inactive;
9. That I have read, understood and completed the Physical Activity Readiness Questionnaire (PAR-Q) and my answers to all questions were “No”, or if I answered “Yes” to any question, I was subsequently cleared for participation in the fitness testing by a Certified Exercise Physiologist or by my physician who completed the Medical Clearance form and the PARmed-X form for that purpose.

Name of Participant (Please Print)	Signature of Participant	Date
Name of Witness (Please Print)	Signature of Witness	Date

RELEASE OF INFORMATION:

I, the undersigned, have been informed about the tests and standards employed in the assessment of fitness, and direct that the information determined during my assessment on these standards is to be provided to the _____ Police Service, and all or any of their respective servants, agents and employees, for consideration in the evaluation of my application for employment as a police officer.

RELEASE AND INDEMNITY:

I, the undersigned, in consideration of my being given the opportunity to participate in the Alberta Police Recruit Selection Process, do hereby release, indemnify and forever discharge _____ Police Service, the Alberta Association of Chiefs of Police (AACP), the Alberta Solicitor General and Public Security, Her Majesty the Queen in Right of Alberta and all of their respective servants, agents and employees, from any and all actions, cause of action, claims, demands, prosecutions and remedies for any and all damages, losses, injuries, and expenses of any nature or kind howsoever arising out of the fitness testing engaged in by myself as part of the aforesaid police constable applicant selection process.

And for the aforesaid consideration I further agree not to make any claim or to take any proceedings against any other person or corporation who might claim contribution or indemnity from Her Majesty, the AACP, the _____ Police Service and all of their respective servants, agents and employees, or from any one or more of them. And for the aforesaid consideration I further agree that this Release and Indemnity shall apply to and be binding on my heirs, administrators, executors and assigns and each of them.

Name of Participant (Please Print)	Signature of Participant	Date
------------------------------------	--------------------------	------

Name of Witness (Please Print)	Signature of Witness	Date
--------------------------------	----------------------	------

Figure V-6.

A-PREP PERFORMANCE DECLARATION

TO BE COMPLETED BY CANDIDATE:		
Surname: (please print)	Given Names: (please print)	Identification Number:
Address – city only:		

Are there any factors which you feel may affect your ability to perform the A-PREP today?

Please check one: NO..... YES.....

If YES, please provide explanation:

I am aware that the information provided above will be reviewed by the person conducting the A-PREP and/or by an authorized representative of any Alberta municipal police service to which I apply, and/or by an authorized representative of the Alberta Association of Chiefs of Police (AACP) and/or by an authorized representative of the Alberta Solicitor General and Public Security. My signature, below, acknowledges that I understand, and consent to, this disclosure and use of information:

Signature of Participant	Date
--------------------------	------

TO BE COMPLETED BY CANDIDATE AND APPRAISER WHEN CANDIDATE HAS RESPONDED “YES” ABOVE:

- After discussing my circumstances, outlined above, with the Appraiser, I have decided to continue with the A-PREP testing today. I have made this decision freely and voluntarily, after being informed that I may participate in the testing on another date, at my option, without penalty or adverse consequence. I understand that the results of the testing which will be performed today will become part of my application file and will be available to the AACP, the AACP – licensed assessment agency and/or all police agencies to which I apply.
- After discussing my circumstances with the Appraiser, I choose not to participate in the A-PREP today.

Name of Participant <i>(Please Print)</i>	Signature of Participant	Date
--	---------------------------------	-------------

Name of Appraiser <i>(Please Print)</i>	Signature of Appraiser	Date
--	-------------------------------	-------------

NOTE TO CANDIDATES: If any factors arise during your performance of the A-PREP that may affect your performance, please advise an Appraiser immediately. Personal information is collected for the purpose of assessing qualifications and suitability as a police officer. Questions concerning collection or disclosure of this information should be addressed to the Alberta Association of Chiefs of Police.