Physician's Certification of Fitness

North Carolina Justice Academy

(Students Name)_____

This certification is being presented to you by an applicant of the North Carolina Justice Academy's **Specialized Physical Fitness Instructor Training Course or the Specialized Compliance and Control Tactics Instructor Course**. By requesting you to complete this certification, the applicant is expressing a desire to participate and complete this specialized training. The program involves a combination of lectures concerning wellness, lifestyle modification techniques and specific activities to improve physical fitness.

The applicant, as a student in the course, will be given a physical fitness assessment designed by the Institute of Aerobic Research, Dallas, Texas, and administered by a certified physical fitness instructor on staff at the Justice Academy. This testing includes:

- Blood pressure
- Bench Press
- Vertical Jump
- Push-ups
- Sit-ups
- 300 meter sprint
- 1.5 mile run

Students will also be required to participate in daily workout sessions that last approximately 60 minutes. Activities include, but are not limited to walking, calisthenics, jogging, running, stretching, cycling, jumping rope, circuit training, weightlifting, and step aerobics.

Your completion of this form will imply that you are not aware of any conditions, i.e., physical, mental, or emotional, that would restrict or hinder the applicant from participating and completing this course. Your signature also implies that you do not have any reservations about this applicant's ability to physically participate in this program.

If you need further information or have any questions or concerns, please contact the North Carolina Justice Academy.

Please sign below indicating your recommendation for the above-named applicant.

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(Physician's Signature) (Date)

Name and Address of Physician (Print or Type):

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