

Attachment A

DELRAY BEACH POLICE DEPARTMENT

MEMORANDUM

TO: _____
Participating employee's supervisor

FROM: _____
Participating employee

DATE: _____

SUBJECT: **ANNUAL FITNESS PROGRAM SIGN-UP**

I would like to participate in the annual Delray Beach Police Department's physical fitness program. The program requires me to complete a series of fitness tests to determine my appropriate fitness activity. These tests are administered by the Department's Fitness Trainers, and participation is for one year from the sign-up date. Should I successfully complete the program, in accordance with the requirements outlined in G.O. 650 Fitness Program, I will be eligible to earn Fitness Leave Time. Also, per G.O. 650 I am eligible for on-duty fitness time while signed-up for the program.

Approvals from you and the Department Fitness Training are required before I can participate. Please check the appropriate box, sign this memorandum, and return it to me for retention in my training file. The Fitness Coordinator will confirm my participation at the sign-up session where I will be tested for eligibility.

Supervisor Name (print)

Date

Supervisor Signature

ID Number

- Approved
- Not approved
- Returned memorandum to employee

Attachment B



Jeffrey S. Goldman
Chief of Police

Delray Beach Police Department

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Delray Beach, Florida 33444-3695
(561) 243-7888 Fax (561) 243-7816



Accredited
Since 2004



Medical/Physician's Clearance to Test Form

Name of Participant: _____ (please print)

Dear Physician:

The purpose of this communication is to inform you of the above-named individual's intentions with regards to participation in the Delray Beach Police Department's pre-enrollment physical fitness test. We are aware that strenuous physical activity may be inadvisable for some individuals. As such, we request that you indicate whether the above-named participant has any medical condition or disorder that would preclude participation.

The testing program will consist of a series of fitness test conducted at our training site. The test is intended to be completed with the fastest possible time(s) and will require maximum effort by the participant. Tests are designed to measure balance, muscular endurance and strength, flexibility, anaerobic power and capacity, and aerobic power. Tests include sit-ups, push-ups or a maximum bench press, a 300-meter run and a 1.5-mile run.

Sincerely,

The Delray Beach Police Department

Statement of Physician's Review:

I have examined this participant and his/her medical history, and based on my evaluation I recommend that:

_____ Participation is not advisable at this time. (If participation is not advised, please do not disclose the reason on this form).

_____ Within a reasonable degree of probability, no medical condition or disorder exists which precludes this participant from participation in the physical abilities tests as described.

Physician's name (please print): _____

Physician's signature: _____

Date: _____

Attachment C

Fitness Data Form
(retained by trainers and uploaded to participant's training file)

Date of Testing: _____

Name of Participant: _____

Age: _____

Height: _____

Measurements:

Weight/Body Mass Index

Weight: _____

BMI: _____

Body Fat%/Skeletal Muscle%:

BF: _____

SM: _____

Visceral Fat:

VF: _____

Testing:

1.5-mile run:

Time: _____

Points: _____

300-Meter run:

Time: _____

Points: _____

1-minute push-ups

Push-up #: _____

Points: _____

1-minute sit-ups

Sit-up #: _____

Points: _____

Fitness Module:

[] Cooper Test

[] Cooper/Walking Test

[] Walking Test

Fitness Trainer Approval:

Signature & ID # _____

Print name _____

Post-program results:

Date of Testing: _____

Measurements:

Weight/Height

Weight: _____

Height: _____

Body Mass Index/Body Fat:

BMI: _____

BF: _____

Visceral Fat/Skeletal Muscle:

VF: _____

SM: _____

Fitness Trainer Approval:

Signature & ID # _____

Print name _____

Attachment D

ANAEROBIC POWER TESTING
300-meter run

Purpose

To measure anaerobic power

Equipment

400-meter running track or any measure 300-meter flat surface that provides good traction, comfortable clothing, and running shoes.

Procedures

1. As with all physical tests, warm up and stretching shall precede testing.
2. If using a 400-meter track, participant runs ¾ of 1 lap (inside lane) at maximal level of effort. Time used to complete distance is recorded in seconds. Consult norms to determine fitness category.
3. Participants should walk for 3-5 minutes immediately following test to cool down.

MALES

	<u>20-29</u>	<u>30-39</u>	<u>40-49</u>	<u>50+</u>
<u>Meets</u>	66-55 secs	68-56 secs	72-64 secs	83.2-68 secs
<u>Exceeds</u>	54.9-49.0 secs	55.9-50 secs	63.9-57 secs	67.9-66.5 secs
<u>Superior</u>	<48.9secs	<49.9 secs	<56.9 secs	<66.4 secs

FEMALES

	<u>20-29</u>	<u>30-39</u>	<u>40-49</u>	<u>50+</u>
<u>Meets</u>	78-62.9 secs	86-72 secs	110-80.5 secs	115-85.5 secs
<u>Exceeds</u>	61-58 secs	71.9-63.9 secs	80.4-68.2 secs	85.4 -73.2 secs
<u>Superior</u>	<57.9 secs	<62 secs	<68.1 secs	<73.1 secs

Attachment E

AEROBIC FITNESS TEST
1.5-mile run

Purpose

To measure aerobic power

Equipment

1.5-mile flat surface that provides good traction, comfortable clothing, and running shoes

Procedures

1. As with all physical tests, warm up and stretching shall precede testing.
2. At the start, all participants line up behind the starting line. On the command ‘go’ the clock is started, and they begin running at their own pace. Although walking is allowed, it is strongly discouraged.
3. A cool down will be performed at the completion of the test.

MALES

	<u>20-29</u>	<u>30-39</u>	<u>40-49</u>	<u>50+</u>
<u>Meets</u>	13:58-11:09 min	14:33-11:34 min	15:32-11:58 min	17:30-13:25 min
<u>Exceeds</u>	11:08-9:52 min	11:33-10:14 min	11:57-10:44 min	13:24-11:45 min
<u>Superior</u>	<9:51 minutes	<10:13 min	<10:43 min	< 11:44 min

FEMALES

	<u>20-29</u>	<u>30-39</u>	<u>40-49</u>	<u>50+</u>
<u>Meets</u>	17:11-13:00 min	18:18-13:58 min	19:43-15:03 min	21:57-16:46 min
<u>Exceeds</u>	12:59- 11:34 min	13:58-12:23 min	15:02-13:14 min	16:45-14:33 min
<u>Superior</u>	<11:33 min	<12:23 min	<13:14 min	< 14:32 min

Attachment F

MUSCULAR STRENGTH

1-minute sit-up

Purpose

The curl up test measures abdominal muscular strength and endurance of the abdominals and hip-flexors, important in back support and core stability.

Equipment

Possible floor mat, comfortable clothing, and stopwatch

Procedures

1. The subject lies on a cushioned, flat, clean surface with knees flexed, usually at 90 degrees.
2. Some techniques may specify how far the feet are from the buttocks, such as about 12 inches. A partner may assist by anchoring the feet to the ground.
3. The position of the hands and arms can affect the difficulty of the test. They are generally not placed behind the head as this encourages the subject to stress the neck and pull the head forward. The hand may be placed by the side of the head, or the arms crossed over the chest, reaching out in front.
4. The subject raises the trunk in a smooth motion, keeping the arms in position, curling up the desired amount. The trunk is lowered back to the floor so that the shoulder blades or upper back touch the floor.

MALES

	<u>20-29</u>	<u>30-39</u>	<u>40-49</u>	<u>50+</u>
<u>Meets</u>	33-44 sit ups	30-40 sit ups	24-35 sit ups	15-24 sit ups
<u>Exceeds</u>	43-49 sit ups	41-45 sit ups	36-40 sit ups	25-31 sit ups
<u>Superior</u>	>50 sit ups	>46 sit ups	<41 sit ups	>32 sit ups

FEMALES

	<u>20-29</u>	<u>30-39</u>	<u>40-49</u>	<u>50+</u>
<u>Meets</u>	24-39 sit ups	20-30 sit ups	14-25 sit ups	10-21 sit ups
<u>Exceeds</u>	40-45 sit ups	31-38 sit ups	26-32 sit ups	22-25 sit ups
<u>Superior</u>	>46 sit ups	>39 sit ups	>33 sit ups	> 26 sit ups

Attachment G

MUSCULAR STRENGTH
1-minute push-up

Purpose

To measure muscular strength

Equipment

Possible floor mat, comfortable clothing, and stopwatch

Procedures

1. A standard push up begins with the hands and toes touching the floor, the body and legs in a straight line, feet slightly apart, the arms at shoulder width apart, extended and at a right angle to the body.
2. Keeping the back and knees straight, the subject lowers the body to a predetermined point, to touch some other object, or until there is a 90-degree angle at the elbows, then returns to the starting position with the arms extended.
3. This action is repeated, and test continues until exhaustion, or until they can do no more in rhythm or have reached the target number of push-ups

MALES

	<u>20-29</u>	<u>30-39</u>	<u>40-49</u>	<u>50+</u>
<u>Meets</u>	22-39 push ups	17-31 push ups	11-25 push ups	6-20 push ups
<u>Exceeds</u>	40-51 push ups	32-41 push ups	26-34 push ups	21-24 push ups
<u>Superior</u>	>52 push ups	>42 push ups	>35 push ups	>25 push ups

FEMALES

	<u>20-29</u>	<u>30-39</u>	<u>40-49</u>	<u>50+</u>
<u>Meets</u>	10-23 push ups	8-16 push ups	6-13 push ups	4-11 push ups
<u>Exceeds</u>	24-33 push ups	17-26 push ups	14-17 push ups	12-15 push ups
<u>Superior</u>	>34 push ups	>27 push ups	>18 push ups	>15 push ups

Attachment H

**Fitness Leave Form
(documenting time for TeleStaff)**

Date of Testing: _____

Name of Participant: _____

Fitness Module:

- Cooper Test
 - Meets Standards (8 hours)
 - Exceeds Standards (10 hours)
 - Superior Standards (12 hours)

- Cooper/Walking Test
 - Meets Standards (4 hours)
 - Exceeds Standards (6 hours)
 - Superior Standards (8 hours)

- Walking Test
 - Meets Standards (4 hours)

Approved by Fitness Coordinator:

Signature _____

ID# _____

Print name _____