Physical Fitness Waiver of Liability

The undersigned does hereby give informed consent to actively engage in the physical fitness assessments conducted by the New Mexico State University (hereafter, NMSU) Police Department as part of the application process for the position of "Police Patrol Officer."

It is understood that all testing and physical activity will be conducted under the direct supervision of a trained physical fitness instructor, and that the activities to be engaged in include, but are not limited to, walking, running, weight lifting, and calisthenic-type exercises. The **possibility of injury or illness exists during any physical activity**, and such activity can also complicate pre-existing conditions that the NMSU Police Department does not know about. Such problems include, but are not limited to, heat related illnesses, abnormal heart beats, abnormal blood pressure, and heart attack. The NMSU Police Department will attempt to monitor participants during testing for problems, however, the applicant is ultimately responsible for recognizing problems and taking appropriate action. *Applicants are strongly encouraged to seek the advice of their physician prior to participating in any physical exercise*.

The undersigned acknowledges that there are inherent risks with any physical activity, and understands that it is the responsibility of the applicant to notify testing personnel of any known pre-existing conditions that might, in any way, adversely affect the applicants ability or safety during the testing. Furthermore, the undersigned understands that it is **the applicant's responsibility** to monitor individual physical performance during the physical activities and testing, and to stop and notify the NMSU Police Department employees administering the testing immediately should unusual or adverse reactions be experienced by the undersigned. In the event of a medical problem, the undersigned recognizes that costs incurred for any required care are not the responsibility of the NMSU Police Department, any employees thereof, New Mexico State University itself, or the State of New Mexico. The undersigned also gives consent for the testing data collected to be used in an anonymous fashion for the purpose of data collection and research.

Notary: (Must be notarized.)

Signature of Applicant / Date