

**MEDICAL CLEARANCE  
(Independent Students Only)**

Medical clearance to participate in the physical conditioning program for the  
**Yuba College Public Safety Training Center / P.O.S.T Basic Re-qualification Course**

\_\_\_\_\_  
(Print Name of Individual)

Dear Physician,

The individual you are examining has been requested to obtain a medical clearance to participate in the physical portion of a Re-qualification Course. This requires an examination of an individual's physical fitness prior to employment as a peace officer in a participating California law enforcement agency, as required by P.O.S.T.

The individual is required to perform a variety of physically demanding activities including: Repetitive bending, standing, rapid/multi-dimensional foot movements, sustained and repeated application of pain compliance techniques to wrist/elbow/shoulder joints, and stretching/warm-up exercises to include push-ups and sit-ups.

The individual will be required to handle and shoot a firearm and shotgun. The individual must have sufficient strength and flexibility to run short distances and rapidly change body position while controlling the firearm.

Having reviewed the above named individual's PAR Q /Health History Statement for his/her medical history and having read the description of the physical performance tests and the physical performances required for the above named course and having personally examined the above named individual, it is my professional opinion that:

\_\_\_\_\_ The above named individual may participate in the physical conditioning program which is unlikely to pose a significant medical risk to the above named individual.

\_\_\_\_\_ The above named individual should not participate in the physical conditioning program.

\_\_\_\_\_  
Physician's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physician's Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

Physicians' Stamp