



Correctional Services Recruitment Unit

FITCO Participant Informed Consent and Release

Instructions: Read and complete sections A, B, and C. Sign and date page 2. Signature must be witnessed by someone who is at least 18 years old. Bring both pages of this completed form with you to your testing centre.

Section A: Consent for Testing

1. I, the undersigned, do hereby consent:

- to undergo tests of occupational fitness, the results of which will be used for consideration in the evaluation of my application for employment as a correctional officer;
- to perform the FITCO which involves: a simulated cell search, an aerobic shuttle run (10.6 METs) and a simulated emergency response circuit consisting of running 60 m. (198 ft.) while scaling four sets of stairs, performing an "inmate control" simulation with a weight machine, performing an "arm retraction" simulation with a weight machine and escorting a 39 kg (86 lb.) "inmate" a distance of 40 m. (132ft);
- to the tests being supervised by a qualified exercise professional with advanced specialized training, who has been trained to administer these occupational fitness assessment protocols;

2. I understand and agree that:

- I may ask questions or request further information or explanation about the tests;
- there exists the possibility of certain changes occurring during or 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 rhythm disturbances or heart attack;
- I will immediately inform the fitness appraiser of any unusual pain, discomfort, fatigue or any other symptoms that I incur during or after the testing;
- I may stop any further testing if I so desire and also that the testing may be terminated by the fitness appraiser;

3. I state that:

I do not have two or more of the following major coronary risk factors, or if I do, I have received medical clearance before reporting to participate in the FITCO:

- Family history of myocardial infarction or sudden death before 55 years of age;
- Currently smoke tobacco e.g. cigarettes;
- Have high blood pressure (>160/90);
- Have diabetes mellitus;
- Have high blood cholesterol;
- Work in a sedentary occupation and am physically inactive;

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4. I have read, understood and completed the Physical Activity Readiness Questionnaire for Everyone (PAR-Q+) and my answers to all questions were "No", or if I answered "Yes" to any questions, I was subsequently cleared for participation in the fitness testing using the ePARmed- X+ (www.eparmedx.com) or my physician who completed the FITCO Physical Activity Readiness Conveyance/Referral form for that purpose.

I, _____, the participant, have read, understood, consented and stated as applicable, to items 1 through 4, in all sections above, participant to initial: _____.

5. Statement for Participants 45 years of age or older:

I am 45 years of age or older, and I state that I have been cleared for participation in the FITCO by my physician who completed the FITCO Physical Activity Readiness Conveyance/Referral Form for that purpose. Participant to Initial: _____.

Section B: Consent to the release of information

I, _____, have been informed about tests and standards used in the assessment of occupational fitness for the purposes of the FITCO and direct that the information collected and determined during my assessment on these standards is to be provided to the Ministry of the Solicitor General and used for its consideration in the evaluation of my application for employment as a correctional officer.

Section C: Release and indemnity

I, _____, in consideration of my being given the opportunity to participate in the correctional officer applicant selection process, do hereby release, indemnify and forever discharge Her Majesty the Queen in Right of Ontario, the Ministry of the Solicitor General 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 correctional officer 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 Ministry of the Solicitor General 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.

Signature of participant

Signature of witness

Please print name

Please print name

Date _____

Date _____