Newburgh Police Department Newburgh, Indiana An Equal Opportunity Employer

The Newburgh Police Department is a fully accredited agency and does not discriminate on the basis of race, color, sex, national origin, religion, age or disability in employment of the provision of services.

Please type or print (ink only) responses to all the questions contained on the entire application form. Any application not completed in its entirety will be disqualified.

Last Name:	First Name:
Middle Name:	Maiden Name:
Home Address:	
City/State/Zip:	
Home Phone No:	Social Security No:
Cell Phone No:	
Place of Birth:	
Date of Birth:	Present Age:
Marital Status: Single Married	Divorced Widowed
Spouse's Name:	Spouse's Maiden Name:
Permanent Person to Contact (In case you o	change your information):
Name:	Phone No:
Relationship:	
Your Email Address: (Please make sure this is your current en through email with applicants).	nail address as we will be communicating
Your Personal Web Page Address: (Faceboo	ok, etc.)

Failure to answer the following questions completely and truthfully will be grounds for disqualification. Use additional paper if necessary.

Have you ever applied for employment with the Newburgh Police Department prior to this application?

Yes:

No: _____ If Yes, give date(s) of application(s): _____

Have you ever applied for employment with any other law enforcement agencies? Yes: No: _____ If Yes, please explain: _____ Have you ever been arrested? Yes: No: If Yes, please explain: Have you ever been charged with and/or been convicted of a felony? No: _____ If Yes, please explain: _____ Yes: Have you ever been charged with and/or convicted of a domestic violence related offense, either misdemeanor or felony? No: _____ If Yes, please explain: _____ Yes: _ Have you ever been charged with and/or convicted of a misdemeanor offense? Yes: No: _____ If Yes, please explain: _____ Have you ever been the subject of a restraining order? No: _____ If Yes, please explain: _____ Yes:

Failure to answer the following questions completely and truthfully will be grounds for disqualification. Use additional paper if necessary.

Are there cu	irrently any crimir	al charges pending against you?
Yes:	No:	_ If Yes, please explain:
Have you ev consumptio		tion/ticket (i.e. parking, speeding, seatbelt, minor
Yes:	_ No:	_ If Yes, please explain:
Have you ev	ver been summone	ed to court?
Yes:	_ No:	_ If Yes, please explain:
Has your dr probation?	iver's license ever	been restricted, suspended, revoked or placed on
Yes:	_ No:	_ If Yes, please explain:
	ver been or are you small claims, etc.)	u currently involved in any civil actions? (i.e. divorce(s);
Yes:	No:	If Yes, please explain:
Have you ev	ver applied for per	mit to carry a handgun?
Yes:	No:	If Yes, please explain:
Have you ev	ver used Hallucino	genic Drugs? (i.e. LSD, Mushrooms, Mescaline, etc)
Yes:	No:	_ If Yes, please explain:
Have you ev	ver used Marijuana	a?
Yes:	No:	_ If Yes, please explain:

Employment History and Work Experience List all employment history and work experience beginning with your current employer. If you were or are currently employed as a police officer, you must include all off-duty employment. Use additional paper if necessary. Failure to include all past employment may be grounds for disqualification.

Current Employer:				
(enter "None" if unemployed)				
Employer's Address:				
Phone No:	Date Employment Began:			
Job Title:	Supervisor's Name:			
Salary:per	Hours / Shift Worked:			
Describe your duties, responsibilitie	s, equipment operated, promotions, etc:			
Previous Employer:				
Phone No:	Date Employment Began:			
Job Title:	Supervisor's Name:			
Salary:per	Hours / Shift Worked:			
Describe your duties, responsibilitie	s, equipment operated, promotions, etc:			
Reason for Leaving:				
Did you leave voluntarily? Yes:	No:			
If No, please explain:				

Previous Employer:	
Phone No:	Date Employment Began:
Job Title:	Supervisor's Name:
Salary:per	Hours / Shift Worked:
	s, equipment operated, promotions, etc:
Reason for Leaving:	
Did you leave voluntarily? Yes:	No:
If No, please explain:	
Previous Employer:	
Phone No:	Date Employment Began:
Job Title:	Supervisor's Name:
Salary:per	Hours / Shift Worked:
Describe your duties, responsibilities	s, equipment operated, promotions, etc:
Reason for Leaving:	
Did you leave voluntarily? Yes:	No:
If No, please explain:	

If you need to list additional previous employment, please use a blank sheet of paper to do so.

Education and Training				
This section is intended to give the employer information about the education and training you have completed, and to demonstrate your skills, knowledge, and abilities to perform the job duties of the position.				
High School attended:				
Address:				
Dates of attendance:	to			
Did you graduate?	High School Equivalent?			
	ou were involved with (you may exclude any ex, age, national origin, or disability):			
College or Trade School attended:				
Address:				
Dates of attendance:	to			
Did you graduate?	Degree:			
Major or Minor course of study:				
	ou were involved with (you may exclude any ex, age, national origin, or disability):			
College or Trade School attended:				
Address:				
Dates of attendance:	to			
Did you graduate?	Degree:			
Major or Minor course of study:				
	ou were involved with (you may exclude any ex, age, national origin, or disability):			

Graduate School attended	d:	
Address:		
Dates of attendance:		to
Did you graduate?		Degree:
	Professional or Specializ	zed Training
enforcement:		you believe would be relevant to law
Are you a graduate of a la Yes: No:	aw enforcement academy If Yes, pleas	? e explain in detail:
Do you possess any type	of professional license of	or certificate? Yes: No:
Туре:	State and Issuing A	Authority:
License No:	Date Issued:	Expiration Date:
If above license was not i	ssued in Indiana, have yo	ou applied for an Indiana license?
Yes: No:		
Has your above license e	ver been suspended, rev	oked, or terminated?
Yes: No:	If Yes, pleas	e explain:

Military History and Status

Are you registe	ered with the Drat	ft?	
Yes:	No:	If Yes, please explain:	
Are you curren	ntly serving in the	National Guard or Reserves? Yes:	No:
Please indicate	e which program	and dates of obligation:	
•	served in the mil nal Guard or Rese	itary on active duty including initial acterized acteriz	tive duty training
Yes:	No:	If Yes, you must attach a copy o	f your DD-214.
Military Branch	ı:	Dates of service:	to
Highest Rank a	attained:	Rank at Separation:	
Type of Discha	ırge:	Re-enlistment Code:	
Are you eligibl	e to re-enlist?		
Yes:	No:	If No, please explain:	
Were you ever active duty?	disciplined (cour	rt marital, article 15, captain's mast, etc	c.) while on
Yes:	No:	If Yes, please explain:	

Miscellaneous

Do you have any commitments (i.e. second job, school, etc.) which might interfere with or adversely affect your employment should we select you for a position?

Yes: _____ No: ____ If Yes, please explain: _____

Please use the following space to provide any further information on training, education, skills, abilities, hobbies, volunteer work, etc., that you possess or have experienced that may be helpful in the evaluation of your application. You may exclude any which indicate race, color, religion, sex, age, national origin, or disability.

Please list your places of Residence	e for the past ten (10) years. Begin with your
present address. Note: You must p	provide home and work telephone numbers. Use
additional paper if necessary.	
City/State/Zip:	
Rent/Own:	Resided at location since:
Landlord's Name:	
Home telephone no:	Work telephone no:
_ .	
Previous:	
City/State/Zip:	
Rent/Own:	Resided at location since:
Landlord's Name:	
Home telephone no:	Work telephone no:
Previous:	
City/State/Zip:	
Rent/Own:	Resided at location since:
Landlord's Name:	
Home telephone no:	Work telephone no:
Previous:	
City/State/Zip:	
Rent/Own:	Resided at location since:
Landlord's Name:	
Home telephone no:	Work telephone no:
-	-

Please list four (4) References who are not re known and have had contact with for at least and work telephone numbers. We will reques reach one or all of the references listed below	five (5) years. You must provide home st additional references if we are unable to
Name:	Occupation:
Address:	Home telephone no:
	Work telephone no:
Years known:	_
Name:	_ Occupation:
Address:	Home telephone no:
	Work telephone no:
Years known:	_
Name:	Occupation:
Address:	Home telephone no:
	Work telephone no:
Years known:	_
Name:	Occupation:
Address:	Home telephone no:
	Work telephone no:
Years known:	

APPLICANT CERTIFICATION

Please read each of the following paragraphs carefully. Indicate your understanding of, and consent to, the contents and conditions of each paragraph by placing your initials in the space provided. Failure to initial all paragraphs will be grounds for disqualification. If you have any questions, please contact the employer.

I understand and accept that, if I am offered a position, it shall be conditional upon my passing any medical and psychological examinations, a CVSA examination, a background investigation, and any further testing that the employer or the Pension Board deems to be necessary to determine my ability to perform the essential functions of the position. I understand and accept that this will include urinalysis. Initials:

I understand that it may be necessary for me to approve and sign any waivers in order for the employer to obtain information from my current and former employers. Initials:

I understand that the employer provides a seven-day per week and twenty-four hour per day service, and therefore, if employed I may be required to work evening shifts or night shifts, including weekends and holidays.

Initials: _____

I understand that if hired as a sworn officer on the Newburgh, Indiana Police Department I must successfully complete required training and courses and be certified by the Indiana Law Enforcement Academy. I further understand that a probationary police officer serves solely at the pleasure of the Metropolitan Board of Police Commissioners and may be released and discharged at any time during said 12 months of probationary appointment without right to trial or hearing before the Metropolitan Board of Police Commissioners.

Initials: _____

I understand and accept that if any information required in this application is found to be falsified or intentionally excluded, my application will be disqualified from further consideration. I further understand and accept that, if I am employed by the employer, I may be subject to disciplinary action, including termination, if any information required by this application has been falsified or intentionally excluded.

Initials:

I understand and accept that the Newburgh Police Department and the Metropolitan Board of Police Commissioners reserve the right to add, delete, and/or modify any phase of the application process deemed necessary. This includes any and all testing, at any time in the application process, without prior notice to applicants.

Initials: _____

I understand and accept that the employment application does not constitute an employment agreement/contract with the employer.

Initials: _____

I understand and accept that it is MY responsibility to immediately inform the employer of all changes in my address, telephone number, name, marital status, employment, driver's license, etc., including notification of any arrests and/or traffic citations. I understand and accept that if I cannot be reached when needed due to failure on my part to inform the employer of status changes, I will be disqualified from further consideration by the Metropolitan Board of Police Commissioners.

Initials: _____

I have completely and thoroughly read and understand everything in this employment application.

Initials: _____

I SOLEMNLY SWEAR THAT ALL OF THE INFORMATION FURNISHED IN THIS EMPLOYMENT APPLICATION IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MY MISREPRESENTATION(S) OR FALSIFICATION(S) OF THE INFORMATION PROVIDED MAY LEAD TO THE WITHDRAWAL OF ANY EMPLOYMENT OFFER OR TERMINATION FOLLOWING EMPLOYMENT.

BY THE SUBMISSION OF THIS DOCUMENT, I HEREBY AGREE THAT I SHALL EXECUTE THE EMPLOYER'S CONDITIONAL, PRE-EMPLOYMENT MEDICAL AND PSYCHOLOGICAL EXAMINATIONS, CVSA EXAMINATION, BACKGROUND INVESTIGATION, AND URINALYSIS DRUG SCREEN CONSENT REQUIREMENTS. I RECOGNIZE THAT MY FUTURE EMPLOYMENT WITH THE EMPLOYER WILL BE JEOPARDIZED IF I ENGAGE IN SUBSTANCE ABUSE, ILLEGAL DRUG ABUSE, OR ALCOHOL ABUSE.

Applicant Signature

Date

It is the goal of the Newburgh Police Department and the Metropolitan Board of Police Commissioners to obtain the most qualified persons to serve the citizens of the Town of Newburgh as police officers. We must have each candidate's cooperation in the various stages of the selection process to achieve this goal.

We will make a reasonable effort to assist each applicant through the long process should a problem arise. However, be aware that certain test dates are "fixed" and cannot be changed or supplemented.

If you are seriously competing for a position on the Newburgh Police Department, we must have complete cooperation from you. You must show up on the dates scheduled and be on time.

No-Shows and Late Arrivals will not be excused.

Applicants must understand that during this lengthy process, the Newburgh Police Department will not discuss matters (scores, scheduling, status, etc.) with anyone other than the applicant. This includes Newburgh Police Officers and/or civilian employees of the Town of Newburgh.

****READ CAREFULLY****

The following documents must be turned in by the closing application date:

- Copy of Birth Certificate.
- Copy of valid Driver's License.
- Copy of Social Security card.
- Copy of High School diploma.
- Copy of GED Certificate with copies of transcripts showing a minimum of 30 semester hours of credit from an accredited college or university with a GPA of 2.0 or higher, or copies of military records showing a minimum of two (2) years of honorable military or reserve duty.
- *Transcripts of high school grades.
- Copy of college degree, if applicable.
- *Transcripts of college grades, if applicable.
- Copy of Military discharge and service record (DD-214), if applicable.

*Transcripts should be mailed to our office.

Mail to: Chief of Police Newburgh Police Department 527 State Street Newburgh, IN 47630

You must provide your own copies of these documents. Documents submitted with the application become the property of the Newburgh Police Department and will not be returned.

Application and documents listed above must be returned by the applicant to the Newburgh Police Department no later than the last advertised day of acceptance.

Applications returned after the last advertised day will not be considered.

APPLICATION PROCESS

The following is a synopsis of the Newburgh Police Department application process and the various testing phases, which must be completed:

In order to apply, all applicants must meet the basic requirements of the Newburgh Police Department as listed below:

- Applicants must be between the ages of 21 and 39 at the time of application*.
- Must have reached 21st birthday on or before the closing date of the acceptance of applications.
- If an applicant reaches his/her thirty-ninth (39) birthday prior to appointment, his/her names shall automatically be removed from the eligibility list.
- Applicants must be United States Citizens.
- Applicants must be high school graduates or possess a GED equivalent certificate*.
- Applicants must possess a valid driver's license*.
- If you have a driver's license from a state other than Indiana, you must be able to get an Indiana driver's license.
- Applicants must never have been convicted of a felony criminal violation.
- Applicants who have served in the military must have received an Honorable discharge. Anything less than an Honorable discharge will not be considered.
- Applicants must be of good moral character.

- An applicant who has engaged in any criminal activity may be rejected by the Metropolitan Board of Police Commissioners regardless of whether the applicant has ever been prosecuted, convicted, or acquitted.
- Applicants must possess strength and agility necessary to perform routine law enforcement duties.
- Applicants must pass all testing established by the Metropolitan Board of Police Commissioners.
- Applicants must submit to and pass a CVSA examination process post-job offer.
- Applicants must be able to pass a Public Employee Retirement Fund (PERF) medical examination and be accepted by the PERF pension board post-job offer.
- Applicants must be able to pass a hearing test as required in the physical examination.
- Applicants must pass drug screens post-job offer.
- Applicants must submit to a battery of psychological examinations and interview with a clinical psychologist post-job offer.
- Applicants must submit to fingerprinting and have a photograph taken by the Newburgh Police Department.
- All applicants who meet the basic qualifications may submit an application that has been completed to the Newburgh Police Department by the specified date.

A complete background investigation will be conducted by the Newburgh Police Department on each candidate. The investigation shall include local and NCIC criminal record checks, neighborhood and current and former employer checks, credit and FBI checks, and any other inspections that may be needed. The investigating officer shall report the results of the investigation in writing to the Metropolitan Board of Police Commissioners. Candidates may be required to sign waivers releasing the Newburgh Police Department and its employees from any liability, should negative information be uncovered during the background investigation.

Evaluations that may be used include, but are not limited to: physical assessment, competitive written entry level examination, oral interview and/or assessment before a sworn police officer board, written composition, interview with the Chief of Police, a member of the Command Staff, and Metropolitan Board of Police Commissioners.

To be considered, applications must be completed in their entirety with all required documentation submitted to the Newburgh Police Department by the closing date of the application process. Note: If any information required in the application is found to be falsified, misrepresented, or intentionally excluded, the applicant will be disqualified.

NEWBURGH POLICE DEPARTMENT EVALUATION PROCESS INFORMATION

The application process with the Newburgh Police Department is governed by procedures established by the Metropolitan Board of Police Commissioners.

The Metropolitan Board of Police Commissioners will establish an eligibility pool from those who apply. The length of time the pool will be valid will be determined by the Metropolitan Board of Police Commissioners when the pool is certified. The length of time will be according to the Merit Law at the time of certification and will be a duration of not less than two (2) years.

The Newburgh Police Department and the Metropolitan Board of Police Commissioners reserve the right to add, delete, and/or modify any phase of the applicant process deemed necessary. This includes any and all testing, at any time in the application process, without prior notice to applicants. Therefore, please note the below listed testing will not necessarily occur in the order listed and may or may not be included in the process.

One phase of the testing procedure will be the physical assessment testing. This is a pass/fail test. Applicants must understand the importance of physical conditioning in the law enforcement profession. Applicants must possess muscular strength (such as timed push-ups/sit-ups), cardiovascular endurance (such as timed distance running), and musculoskeletal flexibility (such as vertical jump/sit and reach) to successfully complete this test. This is a requirement of the State of Indiana, the Indiana Law Enforcement Academy, and the Metropolitan Board of Commissioners.

The written general aptitude test is created by the Newburgh Police Department to conform to the specific needs of the Newburgh Police Department and the State of Indiana.

The oral assessment is a formal structured interview by a board consisting of sworn police officers.

In addition to the oral assessment interview, a writing skills examination will be held. This phase tests the applicant's grammar, sentence structure, spelling, collective thought, etc. Much of police work is spent writing facts in reports.

The Metropolitan Board of Police Commissioners interview is also a formal structured interview.

The Metropolitan Board of Police Commissioners will then determine the applicants who will comprise the eligibility pool.

The background investigation will include checks of the FBI, state and local criminal history, driving records, neighborhood checks, current and past employers, military service, and any other inquiry which may arise from the investigation. Upon any vacancies, the Metropolitan Board of Police Commissioners will determine which applicant in the eligibility pool will receive a conditional job offer contingent with passing the following: CVSA examination (will verify all facts submitted with the application and information from the background investigation and will consist of questions in the areas of the employment application, the applicable, legal/criminal history, domestic violence, drugs/narcotics/alcohol, motor vehicle operation, the job of police officer, medical history, and past law enforcement history, if applicable); a complete medical examination, including drug testing; psychological examinations and interview with a clinical psychologist; and finally, review and approval from the state Public Employees Retirement Fund (P.E.R.F.).

Applicants will be responsible for their own transportation, meals, lodging, and other personal expenses incurred during the process.

All of the testing procedures including the psychological examinations, printing, postage, etc. will be paid for by the Metropolitan Board of Police Commissioners including the medical examination.

Upon passing all required testing and pension boards, candidates will be sworn-in to the department as a probationary police officer. Candidates will immediately go on the payroll. This means that candidates will be receiving pay while in training. New officers will also receive all necessary uniforms and equipment needed for the first year.

The probationary period will be one (1) year and during this period, probationary officers must satisfactorily complete a 16-week course at the Indiana Law Enforcement Academy and the Field Training Program. At the end of a satisfactory probation period, probationary officers will be retained as a regular sworn police officer.

This is a highly competitive process with many applicants all contending for a much smaller number of police positions. Each individual reaches his or her standing in the pool by their own merits.

The Newburgh Police Department and the Metropolitan Board of Police Commissioners would like to take this opportunity to thank you and wish every applicant the best of luck during this process. If you have any questions or need assistance, please contact our office at 812-853-1723.

The Newburgh Police Department is an Equal Opportunity Employer. The Town of Newburgh Metropolitan Board of Police Commissioners is dedicated to the selection of applicants from all segments of the general population without regard to race, religion, sex, ethnic group or disability.

Newburgh Police Department

Physical Assessment Requirements

Vertical Jump: This measures leg power and consists of measuring how high a person jumps.

One Minute Sit-Ups: This measures abdominal or trunk muscular endurance. While lying on your back, you will be given one (1) minute to do the required 29 sit-ups meeting the protocol standards.

300 Meter Run: This measures anaerobic power, or the ability to make an intense burst of effort for a short time period or distance. This component consists of sprinting 300 meters as fast as possible.

Maximum Push-Ups: This measures the muscular endurance of the upper body. This component consists of doing as many push-ups as possible until muscular failure.

1.5 Mile Run: This measures aerobic power or cardiovascular endurance (stamina over time). To complete this component, you must run/walk, as fast as possible, a distance of 1.5 miles.

Test	Standard
Vertical Jump	16 inches
One Minute Sit-Ups	29
300 Meter Run	71 seconds
Maximum Push-Ups	25
1.5 Mile Run	16 minutes, 28 seconds

Protocol for Vertical Jump

Purpose

This is a measure of jumping or explosive power.

Equipment

Vertical measuring apparatus fixed to a smooth wall. Some way to mark extension when jumping (e.g. chalk, dust, Velcro).

Procedure

Participant stands with one side toward the wall, feet together, and reaches up as high as possible to mark his/her standard reach.

Participant jumps as high as possible and marks the highest point of the jump. Participant must jump from both feet in a stationary stance. Arms may be pumped and thrust upward.

Score is the total inches, to the nearest ½ inch above the standard reach mark.

The best of three trials is the recorded score.

How to Prepare for the Vertical Jump

You Must Train to Meet the Standards

Training must be specific to the target activity and therefore, each component has a different training routine.

Vertical Jump

A good way to prepare for this component is to do plyometric training. The basic plyometric exercise routine consists of three exercises: double leg vertical jump, single leg vertical jump, and the double leg hop. Perform each exercise with one (1) set of ten (10) repetitions, three (3) days a week. Do the repetitions ballistically without stopping. Rest three (3) minutes between each set of each exercise.

Double Leg Vertical Jump

Intensity Level: High Starting Position: Stand with the feet shoulder-width apart. Direction of Jump: Vertical. Arm Action: Double arm action. Starting Action: Perform a rapid counter movement and jump as high as possible. Ascent: Thrust arms upward vigorously and reach as high as possible. Descent: When the feet hit the ground, jump again immediately without a stutter step.

Double Leg Hop

Intensity Level: Medium Starting Position: Stand with the feet should-width apart. Direction of Jump: Horizontal, with a vertical component as well. Arm Action: Double arm action. Starting Action: Jump off of both legs and strive for maximum distance. Ascent: Think about "hanging" in the air. Descent: Land in the starting position and immediately repeat the movement.

Single Leg Vertical Jump

Intensity Level: High Starting Position: Stand with one foot on the ground. Direction of Jump: Vertical. Arm Action: Double arm action.

Starting Action: Perform a rapid counter movement and jump as high as possible. Ascent: The arms should be thrust upward vigorously and reach as high as possible. Descent: When the foot hits the ground, immediately jump without a stutter step.

Emphasis should be placed on maximum height and quick, explosive takeoffs. Repeat this exercise with the opposite leg after a brief rest of 15-30 seconds.

Protocol for One Minute Sit-Ups

<u>Purpose</u>

This measures abdominal muscular endurance.

Procedure

The participant starts by lying on his/her back, knees bent, heels flat on the floor, with the fingers laced and held behind the head. Avoid pulling on the head with the hands. The buttocks must remain on the floor with no thrusting of the hips.

A partner holds the feet down firmly.

The participant then performs as many correct sit-ups as possible in one (1) minute.

In the up position, the subject should touch elbows to knees and then return until the shoulder blades touch the floor.

Score is total number of correct sit-ups. Any resting must be done in the up position.

Breathing should be as normal as possible; making sure the participant does not hold his/her breath as in the Valsalva maneuver.

How to Prepare for Sit-Ups

- 1. Determine the number of correct sit-ups you can do in one (1) minute.
- 2. Multiply that number by .75 (75%). Round off the result to the lowest number. This will be the number of repetitions (sit-ups) you will do per set.
- 3. Warm up with some light activity of your choice, such as a stationary bike, walking or jogging on the treadmill, light calisthenics, etc.
- 4. Perform the number of sit-ups (correct form) determined in the calculation done in #2 above.
- 5. Rest no longer than 60 seconds, and do another set of repetitions.

- 6. Repeat #4 and #5 until you have done 3 to 5 sets of repetitions. Even though the last sets may be difficult, maintain proper form. If you have to hesitate longer on the floor on the last sets to get in the full number, then do so but rest no longer than necessary. It is important that you get in all the repetitions.
- 7. Do this routine every other day. Increase the number of reps per set by 1 or 2 each week.

NOTE: If you are unable to do at least 5 reps per set, you will need to modify your routines in order to get in sufficient repetitions to address muscular endurance. You should follow a crunch or curl routine for your abdominals, and also get assistance in designing leg exercises (multi-hip machine or leg lifts) to address the hip flexors. Also, you could use an abdominal machine in a fitness facility using a light enough resistance to get in 15 reps per set for 3 sets.

Protocol for 300 Meter Run

<u>Purpose</u>

This is a measure of anaerobic power.

Equipment

400 meter running track or any measured 300 meter flat surface with sufficient distance to slow to a stop.

Procedure

Warm up and stretching should precede testing.

Participant runs 300 meters at maximal level of effort. Time used to complete distance is recorded.

Participant should walk for 3-5 minutes immediately following test to cool down. This is an important safety practice.

How to Prepare for the 300 Meter Run

To prepare for this component, it is a good idea to do interval training. The first step is to time yourself for an all-out effort at 100 yards. This is called your initial time, or IT. The second step is to divide your IT by .80 to get your training time. The schedule is below.

Weeks	Distance	Reps	Training Time	Rest Time	Frequency
1 & 2	110 yards	10	IT / .80	2 minutes	1 / week
3 & 4	110 yards	10	IT / .80 minus 2-3 seconds	2 minutes	1 / week
5&6	110 yards	10	IT / .80 minus 5-6 seconds	2 minutes	1 / week
7 & 8	220 yards	8	IT / .08 X 2	2 minutes	1 / week
9 & 10	220 yards	8	IT / .80 X 2 minus 4 seconds	2 minutes	2 / week

Protocol for Maximum Push-Ups

Purpose

This measures muscular endurance of the upper body (anterior deltoid, pectoralis major, and triceps).

Procedure

The hands are placed should width apart, with fingers pointing forward. Some part of the hands must lie within a vertical line drawn from the outside edge of the shoulders to the floor. The administrator places one fist on the floor below the participant's chest (sternum).

Starting from the up position (arms fully extended with elbows locked, both hands and both feet only touching the floor), the participant must keep the back straight at all times and lower the body to the floor until the chest (sternum) touches the administrator's fist. The participant then returns to the up position with the elbows fully locked. This is one repetition.

Resting is permitted only in the up position. The back must remain straight during resting.

When the participant elects to stop or cannot continue, the total number of correct push-ups is recorded as the score. No time limit.

How to Prepare for Push-Ups

- 1. Determine the maximum number of correct push-ups you can do in one minute.
- 2. Multiply that number by .75 (75%). Round off the result to the lowest number. This will be the number of repetitions (push-ups) you will do per set.

- 3. Warm up with some light activity of your choice, such as a stationary bike, walking or jogging on the treadmill, or light calisthenics, etc.
- 4. Perform the number of push-ups (correct form) determined in the calculation done in #2 above.
- 5. Rest no longer than 60 seconds and do another set of repetitions.
- 6. Repeat #4 and #5 until you have done 3 to 5 sets of repetitions. Even though the last sets may be difficult, maintain proper form. If you have to hesitate longer on the floor on the last sets to get in the full number, then do so but rest no longer than necessary. It is important you get in all the repetitions.

Do this routine every other day. Increase the number of reps per set by 1 or 2 each week.

NOTE: IF you are unable to do at least 5 reps per set, then you will have to adjust the above calculations on modified push-ups (from the knees) in order to keep the number of reps high enough to address muscular endurance. You should also get assistance in designing a strength routine using selectorized machines including chest, arms, and trunk exercises.

Protocol for 1.5 Mile Run

<u>Purpose</u>

The 1.5-mile run is a measure of aerobic power (cardiovascular endurance). The objective in the 1.5-mile run is to cover the distance as fast as possible.

Equipment

Stopwatch

Indoor or outdoor track or another suitable flat running area measured to 1.5 miles.

Testing forms to record data.

Procedure

Participants should not eat a heavy meal or smoke for at least two to three (2-3) hours prior to the test. Participants should warm up and stretch thoroughly prior to running.

The participant runs 1.5 miles as fast as possible.

Participants should not physically touch one another during the run, unless it is to render first aid.

Finish times should be called out and recorded.

Upon completion of the run, participants should cool down by walking for about five (5) minutes to prevent venous pooling (i.e. pooling of the blood in the lower extremities which reduces the return of blood to the heart and may cause cardiac arrhythmia).

How to Prepare 1.5 Mile Run

To prepare for this test, you need to gradually increase your running endurance. The schedule below is a proven progressive routine. Begin at the level you can accommodate and if you can advance the schedule on a weekly basis, then proceed to the next level. If you can do the distance in less time, then do so.

Week	Activity	Distance in	Duration in	Times per
		Miles	Minutes	Week
1	Walk	1	17 - 20	5
2	Walk	1.5	25 - 29	5
3	Walk	2	32 - 35	5
4	Walk / Jog	2	28 - 30	5
5	Walk / Jog	2	27	5
6	Walk / Jog	2	26	5
7	Walk / Jog	2	25	5
8	Walk / Jog	2	24	5
9	Jog	2	23	4
10	Jog	2	22	4
11	Jog	2	21	4
12	Jog	2	20	4