



JOHNSON COUNTY SHERIFF'S OFFICE

PHYSICAL FITNESS TEST WAIVER

Please complete the following Physical Fitness Test Waiver. Completed forms can be emailed to rlamm@johnsoncountyiowa.gov or mailed to Johnson County Sheriff's Office, PO Box 2540, Iowa City, Iowa 52244.

Testing Date: _____

WAIVER

In consideration of Johnson County, Iowa, through its Civil Service Commission and Sheriff's Office, administering, at my request, a physical qualification test as part of my application to be certified as eligible for the position of Deputy Sheriff, I hereby state that I am, to the best of my knowledge and belief, of sound health and able to undertake such physical qualification test and do hereby release Johnson County, Iowa, and its officers and agents, from any and all liability for injuries or sickness incurred as a result of said physical qualification and waive any and all claims therefore.

Dated this _____ day of _____, _____

VERIFICATION

The information provided above is true and accurate

Applicant Signature

Date