

VIRGINIA DEPARTMENT OF FORESTRY INFORMED CONSENT FOR WORK CAPACITY TESTS

WORK CAPACITY TESTS:

- Arduous Test:** Intended for those involved in arduous duties (lifting more than 50 pounds and occasional demand for extraordinarily strenuous activities). The 3-mile test with a 45-pound pack in 45 minutes is strenuous, but no more so than the duties of wildland firefighting.
- Moderate Test:** Intended for those with moderately strenuous duties (lifting 25 to 50 pounds, and occasionally demand for moderately strenuous activity). The 2-mile test with a 25-pound pack in 30 minutes is fairly strenuous, but no more so than field duties.
- Light Test:** Intended for those whose duties involves light work with occasional field activity. The 1-mile walk in 15 minutes is moderately strenuous, but no more so than the duties assigned.

RISKS:

There is a slight risk of injury (blisters, sore legs, sprained ankle) for those who have not practiced the test. If you have been inactive and have not practiced or trained for the test, you should engage in several weeks of specific training before you take the test. Be certain to warm up and stretch before taking the test, and to cool down after the test.

Prior to taking the work capacity test, you should review the Work Capacity Readiness Information Sheet. Please focus on the section entitled "The First Step!" If you answer yes to one or more of the questions in that section, you should consult a physician prior to taking the test.

AGREEMENT:

- 1) I have read the information on this form and understand the nature, purpose and risks of the job-related work capacity test.
- 2) I have read and understand the information on the Work Capacity Readiness Information Sheet.
- 3) I believe I am physically capable of carrying out the duties of the position (e.g. wildland firefighter).
- 4) I assume responsibility and release the Virginia Department of Forestry from liability for injuries sustained in testing (Reference EEOC #915.002, 5/19/94).

Test To Be Taken (check one): Arduous Test Moderate Test Light Test

APPLICANT NAME (Print)

APPLICANT SIGNATURE

DATE

WITNESS NAME (Print)

WITNESS SIGNATURE

DATE