



HILLSBOROUGH COUNTY SHERIFF'S OFFICE  
RECRUITMENT AND SCREENING SECTION  
**PHYSICAL EVALUATION FORM**

Applicant's name: \_\_\_\_\_  
First MI Last

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Physical Examination: \_\_\_\_\_ Time: \_\_\_\_\_

Physician's Name (Printed): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ - \_\_\_\_\_

- I have examined the above listed applicant for employment with the Hillsborough County Sheriff's Office and found no physical condition that would prohibit the person from participating in the rigors of law enforcement training, to include a 1.5 mile run, push-ups, sit-ups, sprinting and vertical leap testing. I have found the above listed applicant's pulse and blood pressure measurement to be in acceptable ranges.

Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse Rate: \_\_\_\_\_

- I have examined the above listed applicant for employment with the Hillsborough County Sheriff's Office and found that the applicant's blood pressure and or pulse are outside normal ranges. Despite the applicant's condition, he/she may participate in law enforcement training, to include a 1.5 mile run, push-ups, sit-ups, sprinting and vertical leap testing. Any restrictions or comments related to this assessment are listed in the comments section below as is a medical diagnosis of the condition.

Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse Rate: \_\_\_\_\_

- I have examined the above listed applicant for employment with the Hillsborough County Sheriff's Office and found that the applicant's health prohibits him/her from participating in law enforcement training.

Comments (please print):  
\_\_\_\_\_  
\_\_\_\_\_

Diagnosis:  
\_\_\_\_\_  
\_\_\_\_\_

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

License: \_\_\_\_\_ Date: \_\_\_\_\_

**\*Once signed, this form will only be valid for 60 days!**