

## FIREFIGHTER PHYSICAL FITNESS (SHUTTLE RUN) LEVEL 9.6

# REMOTE ASSESSMENT COMPLETION STATEMENT

 **FORM 3**

**Candidate details**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

***Following sections to be completed by qualified fitness instructor:***

Instructor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fitness Facility Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Qualification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Prior to undertaking the Shuttle Run the fitness instructor must read: Tick**

Candidate Driver’s licence *Compulsory requirement*

TFS Shuttle Run Instruction Sheet *(read to candidate/adhere to for assessment)* *Compulsory requirement*

**On completion of Assessment: *(please authorise either successful or unsuccessful completion)***

**Successful Shuttle Run Assessment**

I hereby certify that the abovementioned candidate undertook the shuttle run at this fitness facility under my direct supervision and satisfactorily completed the Shuttle Run to level 9.6

Signed: Date: / /

**Incomplete Shuttle Run Assessment**

I hereby certify that the abovementioned candidate undertook the shuttle run at this fitness facility under my direct supervision, but was unable to satisfactorily complete the Shuttle Run to level 9.6

Signed: Date: / /

**Email this form to TFS Recruitment by close of business Friday 16 December to** **recruitment@fire.tas.gov.au**

**Forms will not be accepted after this date.**