

**POLICE PHYSICAL FITNESS/WELLNESS VERIFICATION**

Please Print or Type

I, \_\_\_\_\_ certify that  
 \_\_\_\_\_ **Academy Director/Designee**  
 pursuant to DPS LEA Rule 10.29.5.9.F and 10.29.9.9.C.1

\_\_\_\_\_ was assessed on the  
 \_\_\_\_\_ **Applicant Name**  
 five (5) fitness/wellness evaluations on \_\_\_\_\_ and has scored  
 \_\_\_\_\_ **Month Day Year**  
 in the 40<sup>th</sup> percentile or better, in each of the five (5) designated fitness/wellness evaluations  
 and is eligible for entry into the New Mexico State-certified law enforcement basic training  
 academy.

Academy Director \_\_\_\_\_ Date \_\_\_\_\_

**Official Scores (40<sup>th</sup> percentile or better):**

Age	Gender	Push-ups	Sit-ups	Flexibility	300 Meter Run	1.5 Mile Run

**State of New Mexico** \_\_\_\_\_ }  
**County of** \_\_\_\_\_ }SS

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me personally  
 appeared \_\_\_\_\_ known to me to be the person  
 \_\_\_\_\_ Department Head  
 whose name is subscribed to the above instrument and acknowledged the same to be his/her  
 own free act and deed.

Notary Public \_\_\_\_\_ My commission expires: \_\_\_\_\_

**(SEAL)**