	FREDERICK COUNTY **DIVISION OF FIRE AND RESCUE SERVICES** **Bureau of Professional Services** **5370 Public Safety Place** **Frederick, MD 21704**

EMERGENCY MEDICAL SERVICES
WORK PERFORMANCE EVALUATION
TEST AGREEMENT FORM

Part of your application process for employment will be successful completion of the Emergency Medical Services (EMS) Work Performance Evaluation (WPE). Below is a list of all six parts, not necessarily in order, and attached is a more detailed description of the EMS WPE. **This is a Pass/Fail test.** You should wear rubber-soled shoes and clothing suitable for all the activities associated with the EMS WPE.

This form must be signed before you will be permitted to participate in the test, and you must also have your physician complete the enclosed certification.

Pre-Employment Emergency Medical Services
Work Performance Evaluation

General Description of Tasks:

The EMS WPE includes donning an SCBA pack, helmet and gloves and doing an initial 75-foot walk followed by six sequential events as follows:

1. Ladder Climb
2. Rescue
3. Interior Stair Climbing Equipment Carry
4. Equipment Carry
5. Exterior Stair Climbing Equipment Carry
6. CPR

I understand that the EMS WPE test is offered by Frederick County free of charge, and my participation in the program and hiring process is voluntary. My participation is not construed as a guarantee that I will successfully pass the EMS WPE or be offered employment by Frederick County.

I am physically capable of participating in EMS WPE test and hereby certify that I am over the age of eighteen (18).

Candidate's Name: _____

Candidate's Signature: _____

Address: _____

Phone #: _____ Cell #: _____