

# Firefighter Applicant Instruction Sheet

## Other Chronic Health Condition

Any applicant:

- With a health condition;
- Any respiratory condition other than asthma; or,
- Taking any prescribed medication,

**must** bring in the following documentation on the day of their pre-placement medical assessment.

### Instructions for applicant:

1. Bring the information from the checklist to your pre-placement medical assessment.
2. Please **do not** include the medical information requested with your application form as it contains personal and confidential medical information.
3. Documentation and test results must be completed **within the last 6 months** from the pre-placement medical assessment date unless otherwise stated in the Medical Forms. *(For example, if the medical assessment is scheduled for January 6, 2016, all your required documents must be dated July 6, 2015 or later.)*
4. If you have Diabetes Mellitus, Epilepsy/Seizures, Asthma, or on an Insulin Pump, please refer to the specific medical forms found on the "Firefighter Recruitment Medical Assessment" web page.

### Checklist:

**Note:** Please download and print the Essential Job Tasks and provide to the physician that will be completing this form for you.

- Firefighter Applicant: Other Chronic Health Condition Medical Form** (attached form). This form must be completed by your treating physician **within the last 6 months** from the pre-placement medical assessment date.

