



STATE OF NEVADA
COMMISSION ON PEACE OFFICER STANDARDS AND TRAINING

5587 Wa Pai Shone Avenue
Carson City, Nevada 89701
(775) 687-7678 FAX (775) 687-4911

JOE LOMBARDO
Governor

MICHAEL D. SHERLOCK
Executive Director

PPRT ACKNOWLEDGEMENT FORM
(RECIPROCITY AND RECERTIFICATION PROGRAMS)

Date _____

Agency Name _____

Agency Administrator _____

Agency Single Point of Contact _____

Peace Officer Name _____

Pursuant to NAC 289.200 (2)(f), "The peace officer passes a physical fitness examination, if any, that is approved and required by the employing agency of the peace officer."

Initial next to the PT option your agency will utilize for this officer:

_____ Agency waives POST physical readiness test.

_____ Agency approved physical readiness test. ***(Include Physical Fitness Test scorecard with Basic Application)***

_____ Agency requests POST proctored physical readiness test.

By signing below, I, as the Agency Administrator, acknowledge the new physical fitness examination requirement and approve this selection.

Agency Administrator Signature

****THIS FORM TO BE SUBMITTED WITH BASIC CERTIFICATE APPLICATION****