



Huntington Beach Fire Department
Performance Exam Form - 2021

NAME:

Last

First

MI

ADDRESS:

Street

City

State

Zip Code

PHONE NUMBER:

EMAIL ADDRESS:

Do you have any physical conditions that may limit your ability to perform the physical exam?

No

Yes

If yes, please explain:

Do you have a valid California Driver's License? No Yes

Please list all related swimming background, training and/or experience:

(i.e. competitive swimming, schools, clubs, Junior Lifeguards , swim times, etc.)

Please input your swim time in the appropriate fields:

100 yd free _____

500 yd free _____

200 yd free _____

1,000 yd free _____

I have signed the waiver on Page 2 of this form:

Initials