

## Self-Assessment Health Screening Questionnaire

The following health screening questionnaire is used to ensure that candidates are fit to undertake the Physical, Dexterity, ladder climb and Team Work assessment. See attached Sheet. **It is not a pre-employment medical Assessment.** Successful candidates, after interview, will need to take the Isle of Man Airport Medical Examination for Aerodrome Rescue and Fire Fighting Service Personnel.

Please read the questions carefully and answer them **honestly** by ticking YES or NO.

- |   |          |
|---|----------|
| 1. Has your Doctor ever said that you have a medical condition and that you should only do physical activity recommended by a Doctor? | Yes / No |
| 2. Do you feel pain in your chest when you do physical activity?  | Yes / No |
| 3. Do you experience a shortness of breath unrelated to physical activity?  | Yes / No |
| 4. Do you lose your balance because of dizziness or do you ever lose consciousness or have fits?                                      | Yes / No |
| 5. Do you have a bone or joint problem that could be made worse by a change in your physical activity level?                          | Yes / No |
| 6. Is your Doctor currently prescribing any medication for your blood pressure, heart problem, joint problems or asthma?              | Yes / No |
| 7. Have you had any significant surgery or sustained a serious injury in the last two months?   | Yes / No |
| 8. Have you suffered any back pain in the last three months   | Yes / No |
| 9. Are you or do you think you are pregnant?  | Yes / No |
| 10. Do you know of any health reason why you should not undertake this physical activity?   | Yes / No |

If you have answered YES to any of the questions then you will need to consult your Doctor to ensure you can safely undertake the Physical Assessment. You must provide a Doctor's Statement that clearly states you can undertake this assessment. Any charge levied by the Doctor is your responsibility.
---

If you have answered NO <b>honestly</b> to <b>all</b> the questions you will be able to undertake the Physical Assessment
---

**I have understood and answered all the questions honestly. I also understand that I should not undertake the Physical Assessment if I feel unwell, and that if my health changes I should seek advice from my Doctor. The D.O.I. Airport's Division accepts no liability for any injury sustained in a Physical, Dexterity and Teamwork Assessment as a result of material non-disclosure by the candidate.**

Print Name.....

Signature.....Date.....

**Please note:** A GP may request a fee for the completion of this form and this will be the responsibility of the Candidate