

**PHYSICAL FITNESS ACTIVITIES FOR CIVILIANS**

**REQUEST FOR APPROVAL OF EXCUSED ABSENCE AND MEMORANDUM OF UNDERSTANDING  
FOR PHYSICAL FITNESS ACTIVITIES OF ARPC CIVILIAN EMPLOYEES**

This request must be completed by the employee and submitted to the first level supervisor accompanied by a doctor's statement certifying that physical fitness activities are permitted and identifying any limiting conditions. The original shall be maintained in the supervisor's record of employee (971 file) along with the doctor's certification.

**EMPLOYEE**

I, \_\_\_\_\_, REQUEST APPROVAL OF EXCUSED ABSENCE, NOT TO EXCEED 3 HOURS PER WEEK, FOR THE SOLE PURPOSE OF PARTICIPATING IN PHYSICAL FITNESS ACTIVITIES. I UNDERSTAND (Employee must initial each line):

\_\_\_\_\_ I MAY ONLY PARTICIPATE IN APPROVED PHYSICAL FITNESS ACTIVITIES DURING ANY PERIOD OF EXCUSED ABSENCE FOR SUCH ACTIVITIES.

\_\_\_\_\_ MY PARTICIPATION IS SUBJECT TO DAILY SUPERVISORY SCHEDULING AND APPROVAL AND THE ABSENCE MAY BE DISAPPROVED BY MY SUPERVISOR PERIODICALLY OR COMPLETELY DUE TO MISSION REQUIREMENTS.

\_\_\_\_\_ IF MY REQUEST IS NOT APPROVED OR I CANNOT BE RELEASED FROM WORK FOR PHYSICAL FITNESS ACTIVITIES DUE TO MISSION REQUIREMENTS, I MAY NOT CHALLENGE THE DECISION UNLESS THE DECISION IS ARBITRARY OR CAPRICIOUS.

\_\_\_\_\_ I MUST RECORD EACH ABSENCE ON MY TIME SHEET WITH THE APPROPRIATE CODE FOR EXCUSED ABSENCE (LN) ALONG WITH THE REMARK "PHYSICAL FITNESS."

\_\_\_\_\_ THAT IN ORDER TO ENHANCE MISSION EFFECTIVENESS, I MUST MAKE EVERY EFFORT TO IMPROVE MY HEALTH AND WELL BEING DURING ANY PERIOD OF EXCUSED ABSENCE FOR THE PURPOSE OF PHYSICAL FITNESS.

\_\_\_\_\_ THAT THIS REQUEST MUST BE ACCOMPANIED BY A DOCTOR'S STATEMENT CERTIFYING THAT PHYSICAL FITNESS ACTIVITIES ARE PERMITTED WITH ANY LIMITING CONDITIONS IDENTIFIED. I AM RESPONSIBLE FOR ANY EXPENSES TO OBTAIN THIS CERTIFICATION.

\_\_\_\_\_ THAT SHOULD MY ABILITY TO PARTICIPATE IN PHYSICAL FITNESS ACTIVITIES BECOME LIMITED IN ANY MANNER, I WILL NOTIFY MY SUPERVISOR IMMEDIATELY.

EMPLOYEE'S SIGNATURE

DATE (YYYYMMDD)

**FIRST LEVEL SUPERVISOR**

RETAIN A COPY OF THIS SIGNED REQUEST AND DOCTOR'S CERTIFICATION IN THE EMPLOYEE'S 971

\_\_\_\_\_ THIS EMPLOYEE IS NOT ON A TEMPORARY APPOINTMENT.

\_\_\_\_\_ ENHANCEMENT OF MISSION ACCOMPLISHMENT CONSIDERED.

\_\_\_\_\_ PERIODIC EXCUSED ABSENCE IS APPROVED FOR UP TO 3 HOURS PER WEEK. THIS MAY BE CANCELLED OCCASIONALLY OR PERMANENTLY DUE TO SCHEDULING OR MISSION REQUIREMENTS.

\_\_\_\_\_ THIS REQUEST IS DENIED DUE TO MISSION REQUIREMENTS AT THIS TIME. RECONSIDERATION MAY BE REQUESTED AS MISSION REQUIREMENTS ALLOW.

SUPERVISOR'S SIGNATURE

DATE (YYYYMMDD)

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The traditional Field-by-Field creation process is extremely ineffective and slow.

The only realistic option to create high-quality forms is the Insert-Text-Anywhere-on-Page (ITAOP) method.

The field creation process is about 10,000 times faster than the traditional method; the list of ITAOP features is not even available for the traditional method.

ITAOP savePDF method proved to be very simple and completely reliable for millions of users all over the world (incl. individuals, companies, organizations, government employees).