

**BCVFA  
REQUEST FOR PHYSICAL  
AT MERCY BUSINESS AND  
EMPLOYEE HEALTH SERVICES**

Please provide the following information to request a physical at Mercy Business and Employee Health Services:

Name: \_\_\_\_\_

LOSAP #: \_\_\_\_\_ Company: \_\_\_\_\_

Email Address: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Mercy physicals are scheduled Monday through Friday. Appointment times are: 8:00 a.m., 10:00 a.m. and 1:00 p.m. (\*See note below.) Please send THREE (3) possible dates / times you would be available in the event your 1<sup>st</sup> or 2<sup>nd</sup> choice has been taken.

NOTE: At least three days' notice is needed to obtain an appointment.

**\*\*\* PLEASE ALLOW AT LEAST THREE HOURS FOR THE APPOINTMENT \*\*\***

- |               |      |
|---------------|------|
| 1. DATE _____ | TIME |
| 2. DATE _____ | TIME |
| 3. DATE _____ | TIME |

PHYSICAL REQUESTING:      ENTRY    OR      NON-ENTRY

IF YOU ARE UNDER 18 YEARS OF AGE, PLEASE CHECK THIS BOX:

SEND COMPLETED FORM TO THE FOLLOWING EMAIL ADDRESS:

[volsafety@baltimorecountymd.gov](mailto:volsafety@baltimorecountymd.gov)

Once we receive your request for a physical, you will receive an email with the scheduled date and time of your appointment. Included in the confirmation email will be forms which you must complete and take with you to the appointment.

\* Monday & Wednesday - Physical times 1:00 PM

Tuesday, Thursday & Friday - Physical times 8:00 AM, 10:00 AM & 1:00 PM