

## **CERTIFICATE OF MEDICAL FITNESS**

**To be obtained only from a Gazetted Government Medical Officer/Medical Officer of a Government Undertaking.**

Please note that this certificate in no other form will be accepted. Medical Certificates issued by private medical practitioners will not be accepted.

Name (in Block letters)	
Father's Name	
Height	
Weight	
Blood Group & Rh. Factor	
Chest	
Heart & Lungs	
Vision	L: _____ R : _____
Colour Vision	
Hearing:	
Hernia/ Hydrocele / Piles (if any)	
Any communicable or other disease (if any)	

I certify that I have carefully examined Sh./Km./Sm. \_\_\_\_\_ son/daughter of Sh. \_\_\_\_\_, who has signed in my presence. He/She has no mental and physical disease and is FIT.

**Signature of the Candidate**

**Signature of the Medical Officer  
with legible seal**

Station: \_\_\_\_\_ Date: \_\_\_\_\_

### **Prescribed Medical Standards for Admission**

Profession demands good physique and stamina. An applicant who suffers from any organic defect or does not have sound health so as to bear the strain of the course which must be heightened in his/her professional life, would be well advised not to take up the Engineering/Management Profession.