ANNEXURE - H

MEDICAL FITNESS

A candidate must be medically fit to undergo the professional course applied for. The medical fitness must be certified by a Registered Medical Practitioner in the prescribed proforma, as given below on a **Letterhead** or on this format with original seal and signature.

CERTIFICATE OF MEDICAL FITNESS	
This is to certify that I have conduc	cted clinical examination of Mr./Ms
	who is desirous of admission to
Health Science Courses.	
He/she has not given any personal history of any disease incapacitating him/her to	
undergo the professional course. Also, on clinical examination it has been found that he/she	
is medically fit to undergo the professional course.	
Certified that he/she fulfills the following criteria.	
 (1) Absence of any incapacitating and /or progressive systemic disease/disorder/condition, (2) Absence of any disability of upper limb/s. (3) Absence of any major visual/ auditory disability. (4) Absence of psychosis/neurosis/mental retardation, (5) Ability to maintain erect posture, (6) Reasonable manual dexterity. Though, following deviations have been revealed, in my opinion, these are not 	
impediments to pursue a career as a Medical / Dental / Ayurved / Homeopathy / Unani /	
Occupational Therapy / Physiotherapy / Audiology & Speech, Language Pathology /	
Prosthetics & Orthotics / BSc Nursing. (Strike, which is not applicable):	
1	
2	
3	
Address of the Registered Medical Practitioner	Signature
	Name
	Registration No.
Date :	Seal of Registered Medical Practitioner