

## **MEDICAL FITNESS CERTIFICATE**

I hereby certify that, I have examined Sri \_\_\_\_\_ a candidate for employment in the National Institute of Technology Silchar and cannot discover that he / she has any disease (communicable or otherwise), constitutional weakness or bodily infirmity except \_\_\_\_\_. I do not consider this a disqualification for employment in the office of National Institute of Technology Silchar.

Signature of Chief Medical Officer or Civil Surgeon

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

Registration No. \_\_\_\_\_

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

Seal