

FORMAT FOR MEDICAL CETIFICATE

**(TO BE OBTAINED ONLY FROM A CHIEF MEDICAL OFFICER OF A DISTRICT
OR CHIEF MEDICAL SUPERINTENDENT OF GOVT. BASE HOSPITAL)**

Name of Candidate		Age:		Sex:	
Roll No.:		Category:		Subcategory:	
Merit Position:		Father's Name:			
(Total be filled in by the candidate)					

L.T.		M.I.		V I S I O N	Colour Vision Without glass With glass
Height	Weight	Chest	Abdomen		
Blood Group					

History	Operation	Seizures	Kock's Asthma	Colic's Piles	BP Diabetes
E	Pulse	Tonsil	DNS	Hernia	
X					
A					
M	Pallor	L Nodes	CSOM	Hydrocele	
I					
N					
A	Cardiovascular		CNS		
T					
I	Respiratory		GIT		
O					
N	Genitourinary		Others		
S					
Is the candidate Physically handicapped : Yes/No					
If yes. Type and extent of handicap (Please write)					
Type _____					
Extent _____%					
Any other Type of handicap (Please specify) :					
Any other finding:					
Final result. (Fit/Unfit).....based on the medical standards for the purpose of Admission in B.Tech Programme.					

Signature of Candidate

Signature of Chief Medical Officer/

Chief Medical Supdt. of Govt. Base Hospital (With official Stamp)

Date:

MEDICAL STANDARDS

1. General Requirement

The candidate should possess good general physique and should be free of any infectious or contagious disease. He/She should be free from any physical or mental illness or defect likely to interfere with the training in the University.

2. Heart and lungs: No significant abnormality should be present.

3. Hernia, Hydrocele: There should be no hernia or hydrocele. If present, corrected before admission.

4. Vision:

(a) Normal without glasses. Where defective, it must be corrected to 6/9 in the better eye and 6/12 in the other eye.

(b) There should be no colour blindness for major colours.

5. Hearing: Normal in both ears. Where defective, it must be corrected before admission.

6. Speech: There should be no major speech defects.

Note: