## FROM – 4 MEDICAL CERTIFICATE OF FITNESS TO RETURN TO DUTY

Signature of Applicant :
CIVIL SURGEON OF
I
department
illness and is now fit to resume his duties in Government service I also certify that before arriving at this decision. I have examined the original Medical certificate and statements of the case (or certified copies there of) on which leave was granted or extended and have taken these into consideration in arriving at my decision.  Dated:
Dated: