## **MEDICAL CERTIFICATE**

I certify that I have carefully examined Mr. / Ms.	
on / / and further certify that his / her eyesi	ight is good, and that any minor defect
in the same can be overcome by means of suitable glasses, that he $\!\!\!/$ she is fairly robust, his $\!\!\!/$ her	
constitution is sound and that he / she has no disease bodily or mental infirmity unfitting	
him / her now or likely to unfit him / her in future, for manual work on workshop or active	
outdoor service as an engineer.	
Date:	Signature:
Address:	Name:
	Qualification:
	Registration: