Annexure II

MEDICAL FITNESS CERTIFICATE FOR ADMISSION IN JORHAT ENGINEERING COLLEGE, JORHAT

Paste a Recent Passport Size Photograph

| 1. Name of the student | · |
|----------------------------|--|
| 2. Age | <u></u> |
| 3. Sex | <u>:</u> |
| 4. Identification mark | · |
| 5. Pulse | <u></u> |
| 6. Blood Pressure | · |
| 7. Chest | |
| a. Normal | <u>:</u> |
| b. Expanded | <u></u> |
| 8. C.V.S | · |
| 9. C.N.S | <u></u> |
| 10. Eye | <u></u> |
| 11. Hearing | · |
| 12. Any Abnormality | · |
| 13. Blood group | · |
| 14. Percentage of disabili | ty (for physically handicapped student): |
| | xamination, I certify that he/she is in good/bad mental and physical health ical defects that may interfere with his/her studies, including a professional's |
| Date: | |
| Place: | (Name and signature of the Govt Medical Officer (Gr-I) with seal and registration number) |
| | Signature : |
| | Name : |

Reg. No. :