

PHYSICAL FITNESS CERTIFICATE

For Admission to Hosur Public School, Hosur

(To be examined and certified by a registered Medical Practitioner)

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Signature of Candidate

.....
Signature of Parent

I, Dr
after careful personal examination of the case do hereby certify that
Sri./ Kum.
S/o / D/o
whose signature is given above is found physically fit to undergo formal school
education.

Based on the clinical examination, I certify that he/she is in normal state of
Health and free from any communicable or non communicable disease/illness or
physical defects/infirmity which may interfere with his/her schooling including
the active outdoor activities.

The immunization status and records are up-to date.

His/Her Height : cm
 Weight : Kg
 Chest : cm
 Vision :

Signature of the Medical Practitioner

Name :
Place: Reg. No. :
Date: Designation:

(Office Seal)