

PHYSICAL FITNESS CERTIFICATE

For admission to Hosur Public School, Hosur
(To be examined and certified by a Registered Medical Practitioner)

.....
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

Place :

Name :

Date :

Reg. No. :

Designation :

(Office Seal)