



- 7. Vision with or without glasses
  - (a) Right Eye .....
  - (b) Left Eye .....
  - (c) Colour Blindness .....
  - (d) Uniocular vision .....
- 8. Respiratory system .....
- 9. Nervous system .....
- 10. Heart: (a) Sounds .....
- (b) Murmur .....
- 11. Abdomen (a) Liver .....
- (b) Spleen .....
- 12. (a) Hernia .....
- (b) Hydrocele .....
- 13. Any other defects .....
- .....
- .....

Certified that ..... son/daughter of .....

- (a) fulfills the prescribed standard physical fitness and is FIT for admission to Engineering/Architecture/Pharmaceutics / Science course
- (b) does not fulfill the prescribed standard of physical fitness and is unfit/ temporarily unfit for admission due to following defects .....
- (c) .....

.....  
Signature of the Medical Officer

Date: .....  
Full Name .....  
Medical Registration No. ....

Official seal