

PROFORMA-III

MEDICAL CERTIFICATE OF FITNESS INTO GOVERNMENT SERVICE

(UNDER SUPPLEMENTARY RULES: 3 OF FRSR)

1. "I hereby certify that I have examined Mr./Ms., a candidate for employment in the Malaviya National Institute of Technology Jaipur and cannot discover that Mr./Ms. has any disease (communicable or otherwise), constitutional weakness or bodily infirmity except I do not consider this a disqualification for employment in the Malaviya National Institute of Technology Jaipur. The age specified is accordance to candidate's own statement.
2. I have further to certify to the following finding in my Medical Examinations:-
3. Height:.....Ft :..... Inch.:..... 4. Weight :
5. Vision : Right Eye : Left Eye :
- Whether the vision is corrected by the glasses or not should be clearly mentioned.
6. Distant:..... 7. Near:.....
8. Urine Color :
- Albumin Present _____
- Sugar Present _____
- Specific Gravity _____
9. **B.P. Reading**
Systolic : Distolic:
10. Condition of Heart _____

Signature of the Candidate

Place of Examination:

Date:

Signature and Designation
of the Medical Officer (With Seal)