

# MEDICAL EXAMINATION REPORT

1. Name :
2. Father's Name :
3. General Appearance :
4. Physical Deformity (if any) :
5. (A) Height (in cm) :  
(B) Weight (in Kg) :  
(C) Chest Measurement :  
(i) Complete Expiration :  
(ii) Full Inspiration :
6. Condition of Teeth :  
    Gum :  
    Tongue :  
    Ear :  
    Throat :
7. Respiratory System :
8. Eye Vision :
9. Colour Blindness :

Signature of the Candidate  
(To be signed in front of the M.O)

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## REMARKS OF MEDICAL OFFICER

I have examined the above candidate, Sri/Smt  
and consider him/her fit/unfit for undertaking Technical Education.

Signature and Designation  
With seal of the medical officer  
(To be obtained from an authorized Govt. Medical Officer)

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All entries are properly filled in except.....  
(for office use only)

Signature of the verifying Officer  
With date