

## MEDICAL CERTIFICATE

I have, this day, medically examined Shri.....  
.....  
..... (Name and address) and found that he has no disease or infirmity which would render him unsuitable for Government Service. His age according to his own statement, is ..... and by appearance, is ..... years. His standards of vision (without glasses) are as follows.

### Standards of Vision

	<u>Right Eye</u>	<u>Left Eye</u>
(i) Distant Vision	..... Snellen	..... Snellen
(ii) Near Vision	.....Snellen	..... Snellen
(iii) Field of Vision	.....	

(Specify whether field of vision is full or not. Entries such as Normal, Good etc are inappropriate here)

- (iv) Colour Blindness .....
- (v) Squint .....
- (vi) Any morbid condition of the eyes or Lids of Either eye .....

He is Physically fit for the post of Fireman (Trainee) in the Fire and Rescue Services and has good physique and fitness and has the capacity to do rough outdoor work.

Signature  
Name and Designation of the Medical Officer

Place :

Date :

(Office Seal)

**Note:-** Details regarding standards of vision should be clearly stated in the Certificate as given above and vague statement such as Vision 'Normal' 'average' etc will not be accepted. Specification for each eye should be stated separately against each item. If the specification are not as indicated above, the officers issuing the Certificate should certify whether the candidate has got better standards of vision or worse standards of vision, as the case may be, otherwise the Certificate will not be accepted.