

MEDICAL CERTIFICATE

[to be obtained from a Medical Officer not below the rank of a **Civil Surgeon**]

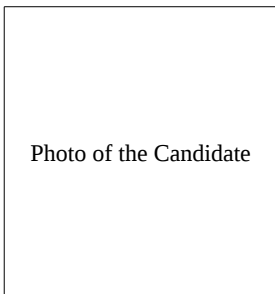
I have this day, medically examined Sri./Smt.....

.....
(Name & Address) and found that he/she has no disease or infirmity, which would render him/her unsuitable for Government Service. He/She is free from physical defects such as knock- knee, flat foot, varicose vein, bow legs, deformed limbs, irregular and protruding tooth, defective speech and hearing. His/Her age, according to his/her own statement isand by appearance is His/Her standards of vision is as follows:-

I. STANDARDS OF VISION (without glasses)		
	Right Eye	Left Eye
1. Distant VisionSnellenSnellen
2. Near VisionSnellenSnellen
3. Field of Vision
[Specify whether Full or Not (Entry 'Normal', 'Good', 'Average' etc., will be inappropriate here)]		
4. Colour Blindness		
5. Squint		
6. Any morbid conditions of the eye or lid of either eye.		
II. IDENTIFICATION MARKS		
1.		
2.		

He/ She is Physically Fit for the post of Sub Inspector of Police (Trainee)/ Armed Police Sub Inspector (Trainee) in Police [Kerala Civil Police/ Armed Police Battalion] Department.

I certify to the best of my knowledge and belief that the applicant Sri/Smt.....(Name & Address) is the person herein above described and that the attached photograph has a reasonably correct likeness.



Signature
Name & Designation of the Medical Officer

(The signature of the Medical officer shall be affixed on the photograph leaving the face clear).

Place:

Date:

(Office Seal)

Note:- Details regarding Standards of vision should be clearly stated in the Certificate, as given above. Vague statements such as vision “normal”, “good”, “average” etc., will not be accepted. Specification for each eye should be stated separately. If the specifications are not as indicated above, the Certificate will not be accepted.