FORM OF MEDICAL CERTIFICATE

(To be obtained from Medical Officer not below the rank of an Assistant Surgeon / Junior Consultant)

	I	have	this	day	medically	examined	Smt./Kum	
							(Name	& address) and found
that s	she has i	no disease	or infirm	nity, whic	h would render	her unsuitab	le for Governr	ment Service. She is free
from	physica	al defects	like knoo	k-knee, f	lat foot, varice	se vein, bow	legs, deforme	ed hands limbs, irregular
							•	her own statement is
			and by	appearan	ce is	and her s	standards of vi	sion is as follows.
					Standards o	of Vision		
					(without §	glasses)		
				Righ:	t Eye]	<u>Left Eye</u>	
i	i) Distant Vision			Snellen			Snellen	
i	ii) Near Vision			S	Snellen		Snellen	
i	ii) Field	of Visior	1					
i	inappi	ify wheth ropriate h ur Blindne	ere)			tries such as	Normal, Aver	rage, Good etc are
v) Squi	nt						
v	vi) Any 1	morbid co	ondition o	f the eyes	or lids of eithe	er eye		
vii) Marks of Identification								
		1)						
	2	2)						
	She is pl Departm	-	fit for the	post of V	Vomen Police c	onstable (Wo	omen Police Ba	attalion) in the Police
Lo	artific to	a tha bagt	t of my l	en ovvloda.	and baliaf th	at the applied	ont Cmt /Vum	
	-		-	•		• •		Address) is the person
								eness. (The signature of
					photograph le		•	eness. (The signature of
the ivit	- Carcar O		ii oc aiiix	ica on the	photographic	aving the face	cicar.)	
	Photo of the candidat							
Place):					Name a	nd Designatio	Signature n of the Medical Officer
Date						I will u		

(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/Good/Average' will not be accepted. Specification for each eye should be stated separately. If the specifications are not as indicated above, the officer issuing the Certificate should clarify 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.