

PHYSICAL FITNESS CERTIFICATE

To be attached with the original documents at the time of interview for selection of discipline

I certify that I thoroughly examined Mr. / Ms. _____

S/o, D/o _____ and I do not find any disease, which could prevent him / her from hard work and continuous studies at Mehran University of Engineering & Technology, Jamshoro.

Identification Mark (if any): _____ Pulse Rate: _____

_____ Vaccination Marks: _____

Height: _____ Meter _____ cms _____ Right Arm: _____

Weight: _____ Kgs. _____ Left Arm: _____

Chest Expanded: _____ cms _____ Vision (Without Glasses): _____

Chest Unexpanded: _____ cms _____ Right Eye: _____

Range of Expansion _____ cms _____ Left Eye: _____

_____ (Vision should be 6/6 with or without glasses)

Number of Teeth: _____ Blood Group: _____

It is certified that the above candidate:

- i. Does not suffer from any inveterate skin disease.
- ii. Does not suffer VD.
- iii. Does not bear traces of pervious acute of chronic disease pointing to and impaired constitution.
- iv. Does not suffer from any contagious disease.
- v. Is not deaf and dump and
- vi. X-Ray examination of his / her chest is satisfactory.

Signature of Medical Practitioner

PMDC Registration No.: _____

Place: _____ Date: _____