

Medical Fitness Certificate for Engagement of ACT Apprentices in RCF/Kapurthala

No-----

Dated:-----

Name of Hospital:-----

Place:-----

It is certified that Sh./Smt./Ms-----S/o/D/o/Wo Sh-----
----- was medically examined on date-----
--- and was found physically & Mentally fit to be engaged as an Apprentice as per Apprentices Act,
1961 and Para-4 of Apprenticeship Rules 1992.

Paste recent
passport size
photograph here

Signature of Doctor (Gazetted)

Name of the Doctor-----

Designation-----

Stamp

Signature of the Candidate
In the presence of Medical Examiner

Verified by Medical Examiner Stamp: