



Indian Institute of Technology Jodhpur
Office of Students

Admin Building, NH 62, Nagaur Road, Karwar, Jodhpur 342030, INDIA
Phone: (0291) 280 1141;email:office_students@iitj.ac.in

Entry No.																			
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MEDICAL EXAMINATION REPORT FOR PG STUDENTS

(it is mandatory to bring medical reports in original at the time of academic registration for verification purpose)

GENERAL EXPECTATIONS

Candidate will have good general physique with:-

- (a) Vision: Should be normal, in case of defective vision it should be corrected to 6/9 in both eyes or 6/6 in the better eye.
- (b) Hearing: Should be normal. Defective hearing should be corrected.
- (c) Heart and Lungs: Should not have any abnormality and no history of mental disease or Epileptic fits.

(To be issued by a Registered Medical Practitioner)

PERSONAL HISTORY

1. Name _____
2. Father/Guardian's Name _____
3. Age _____ Year _____ Months _____ Date of Birth _____
4. Sex _____
5. Identification Mark on the Body _____
(This can be a mole, scar or birthmark)
6. Major illness/operation: _____
(Specify nature of illness/operation)
7. (a) Declaration by student: I am not suffering from any chronic illness like Epilepsy, Bronchial Asthma etc.

Signature of the Candidate

MEDICAL CERTIFICATE FOR PG STUDENTS

(Item 7-19 to be filled by Medical Officer conducting the Medical examination)

8. Height _____ cm.

9. Weight _____ Kg

10. Past History

11. Chest

(a) Mental Disease _____

(a) Inspiration _____ cm.

(b) Epileptic fit _____

(b) Expiration _____ cm.

12. Vision with or without glass

13. Hearing _____

(a) Right eye _____

14. Abdomen

(b) Left eye _____

(a) Liver _____

(c) Colour Blindness _____

(b) Spleen _____

15. Respiratory system

16. Nervous System

17. Blood Group _____

18. Heart

(a) Sounds _____

19 (i) Hernia _____

(b) Murmur _____

(ii) Hydrocele _____

20. Any other defects _____

Certified that Mr/Ms/Mrs _____ son/daughter of

Fulfils the prescribed standard of physical fitness and fit FIT for admission to engineering/science course.

Does not fulfil the prescribed standard of physical fitness and is unfit/temporarily unfit for admission due to following defects:

Signature of the Medical Officer

Date _____

Regn. No. _____

SEAL