

Performa M 1
NIT Raipur

Recent Photograph
of the candidate to
be verified by the
doctor

CERTIFICATE OF PHYSICAL FITNESS

(To be filled in full by a Registered Medical Practitioner holding at least MBBS degree)

I do hereby certify that I have examined Sri/Kum/Smt
an applicant for admission to B.Tech. / B.Arch. Degree Programme and could not discover that he/she
has any disease, constitutional affection, bodily infirmity or mental unsoundness.

His/Her age according to his/her statement is.....year and by appearance
aboutyears.

Height.....cm

Weight.....kg

Chest:Exp.....cm

Insp.....cm

Heart Lungs.....

Vision..... Hearing.....

Presence or otherwise of

Hernia, hydrocele, varicocele, piles, etc.

Personal Marks of Identification: 1.

2.

Place

Signature of doctor:

Date

Name:

Designation:

Office Seal:

Tahsil/Dist.: