



GENERAL MEDICAL CERTIFICATE

Legal name (written exactly as it appears in passport)

First/given name: Samyukta Prashanth

Family/surname: Bharadwaj

Permanent home address: Villa-54, Mantre Courtyard, Masegoudampalya, B'lore.

Date and place of birth (dd/mm/yyyy) 10/05/2005, Bangalore.

The patient mentioned above is at present free from infectious diseases and is in good physical and mental condition. There are no medical objections to a stay as a student abroad.

Please, circle the appropriate answer below	Examination date*	Result
AIDS*: (HIV infection can only be detected after 3 months) Please, attach HIV serologic test result.	18/06/24	negative / positive
Hepatitis-B*: Please, attach the copy of your vaccination card / in the lack of vaccination card, documentation* about your antibody protection.	18/06/24	1 st dose - Received card attached/protection level: IU/I
Hepatitis-B*: (HBV infection can only be detected after 3 months) Please, attach HBV serologic test result.	18/06/24	negative / positive
Hepatitis-C*: (HCV infection can only be detected after 3 months) Please, attach HCV serologic test result.	18/06/24	negative / positive
Chest X-ray: Please, attach the chest's X-ray result (not the film) in English / Hungarian (not older than 3 months).	17/06/24	negative / positive

*Please note: tests have to be taken within a year!

Remarks:

Any chronic diseases the patient is being treated for: None

Special needs: All

NAME AND ADDRESS OF THE DOCTOR: Dr. Raj Kumar K, #41012, Prestige Falcon City, Kanakachennur Road, Konanakunte Cross

PLACE AND DATE: Bangalore,

SIGNATURE AND STAMP OF THE DOCTOR:

Dr. Rajkumar K
MCh, Dip In Radiation Medicine
KMC : 70079