

MEDICAL CERTIFICATE OF FITNESS

I have examined Shri / Kumari / Smt. Ituliya Bhargavkumar
son / daughter of Shri Heerashbhai
aged 19 Years, resident of 103 Yogikrupa Society,
Mahavir Chowk, Nana Vasabha Surat, Gujarat.

and certify that, he / ~~she~~ is free from deafness, defective vision (including colour vision) or any other infirmity, mental or physical, likely to interfere with the efficiency of his / ~~her~~ work and found him / ~~her~~ possessing good health.

Marks of identification: Burn scar mark at (L) hand.

(Signature of Candidate)

(Impression of left-hand thumb of Candidate)

(To be done in presence of the Medical Officer)

Signature of Medical Officer: Rajesh Ramanani

Name of Medical Officer: Dr. Rajesh Ramanani (MD)

Registration No. Cr-30897

Date: 4/3/2024

Seal

This certificate is being given to him / ~~her~~ for the purpose of application for admission in Medical Educational Courses under Admission Committee for Professional Under Graduate Medical Educational Courses (ACPUGMEC), Govt. of Gujarat.

Note: Medical certificate granted by a qualified medical practitioner holding at least M.B.B.S. Degree and registered with Medical Council of India, shall only be valid. The date of issue of the medical certificate should be within one year from the date of application.