

MEDICAL CERTIFICATE

For NEET-UG 2024 Qualified Candidates

I have personally examined Mr. / Ms. / Mrs. _____ son / daughter of
Mr. / Ms. / Mrs. _____ with date of birth _____
and having permanent residential address at _____

(verified from Aadhaar Card / Voter ID Card / Passport / Official School or College ID Card) who is a prospective candidate for admission into undergraduate Medical / Dental (MBBS / BDS) course in colleges in West Bengal for 2024-25 admission session, and observed as follows:

1. Personal identification mark (if any)
2. Apparent age years 3. General Physique 4. History of TB Yes No
5. Height cm 6. Weight kg 7. BMI kg/m² 8. Pulse bpm 9. BP mmHg
10. Chest measurements: a) Relaxed cm b) Full inspiration cm c) Full expiration cm
11. Vision: Visual acuity: Right eye Left eye Color vision
(mention if glasses / lenses are being used to correct refractive errors)
12. Immunization status:
(whether up to date as per latest National Immunization Schedule)
13. Condition of heart 14. Condition of lungs
15. Condition of abdominal viscera 16. Blood group
17. Any neurological deficit OR orthopedic disability OR any other
significant medical / surgical / gynecological / psychiatric illness

After examination, I do hereby certify that he / she (strike out whichever is NOT applicable):

- Has no significant physical / mental illness or disability that may preclude him / her from pursuing basic medical / dental course and is therefore FIT to join the course.
- Has / may have significant physical / mental illness or disability that requires further assessment to determine suitability for joining basic medical / dental course

Candidate's NEET-UG 2024

Roll No. Application No. Combined merit rank (re-revised)

Recent passport size photo
attested by Medical Practitioner

Date:

Place:

Signature of Registered Medical Practitioner

Registration No.

Council of registration

Contact No.

SEAL