

**Medical Certificate for NEET UG 2024 qualified candidates**

Roll No.....

Application No .....

NEET UG 2024 combined merit rank .....

I, Dr ..... have examined Sri/Smt .....

Son/daughter of ..... , residing at

..... [Verified from Aadhar card/passport/voter card/school or college ID card], a candidate for admission into the Medical/ Dental UG degree colleges in West Bengal for 2024- 25 admission session and observed as follows:-

1. Personal mark of identification.....
2. Apparent age..... years
3. Any history of Pulmonary Tuberculosis ..... yes/no (put tick to appropriate one)
4. Chest measurement:
  - a. Normal respiration..... cm
  - b. In Full inspiration..... cm
  - c. In Full expiration ..... cm
5. Height..... cm
6. Weight .....Kg
7. BMI .....
8. Eye sight visual acuity:
  - a. Right eye .....
  - b. Left eye .....
  - c. Colour blindness ..... present/absent ( put tick to appropriate one)

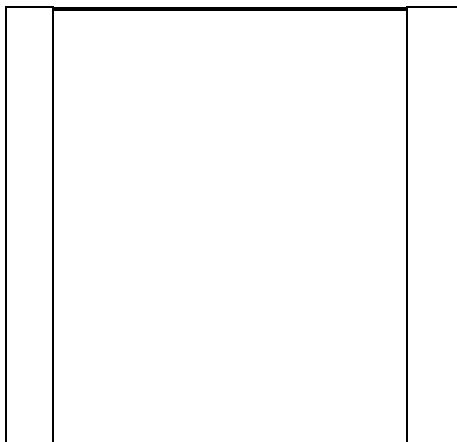
- 9. Immunization status ..... ( whether up to date as per latest National Immunization Schedule)
- 10. General physique .....
- 11. Heart .....
- 12. Lungs .....
- 13. Abdominal viscera .....
- 14. Blood Group .....
- 15. Any neurological deficits .....
- 16. Any orthopedic disability .....

I do hereby certify that I cannot discover that he/she has any disease physical and or mental that makes him/her unsuitable to continue s t u d y i n g UG Medical / Dental c o u r s e.

I consider the above candidate FIT / UN FIT to join his/her Medical or Dental UG institution.

Date .....

Place .....



\_\_\_\_\_  
Signature of Registered Medical Practitioner  
Registration No.....  
Council of registration.....  
Contact No .....

**SEAL**

(Candidate to paste recent passport Size photograph on which Medical practitioner has to attest)