

I Certify that I examined the person mentioned above on (date of examination)	I extent this Certificate will(if certificate is not extended, the period for which the workers is considered unfit for work to be mentioned.	Signs and symptoms observed during examination.	Signature of the Factory Medical officer with date

- Notes: 1. If declared unfit, reference should be made immediately to the Certifying Surgeon.
2. Certifying Surgeon should communicate his findings to be occupier within 30 days of the receipt of this reference.