## Annexure-02

## <u>Certificate of Medical Fitness</u> <u>(To be obtained from a Registered Medical Officer/Practitioner)</u>

This is to certify that I have carefully examined	Mr./MsS/D/c
Mr./Mrs	R/o
	_who has signed in my presence.
He/she is in good mental & physical health and is	s free from any type of physical/chronic ailments
The candidate is fit to join the Engineering/Mana	gement/Economics/Law program offered at BMI
Munjal University, Gurugram etc.	
Medical History (Past/Present)- Please specify	with supporting documents
Signature of the Candidate	
Place:	
Date:	
Signature of the Medical Officer/ Practitioner with legible Seal	
Place:	
Date:	
Date:	<del></del>