

# SAI HOSPITAL

Talegaon Chakan road Mahalunge (I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 03/07/29

- 1. Certificate Serial No: \_\_\_\_\_
- 2. Name: Sagar Patne
- Identification Mark a) \_\_\_\_\_ b) \_\_\_\_\_
- 3. Father's/ Husband's Name: Hari Patne
- 4. Sex: male
- 5. Residence: Mahalunge
- 6. Date of Birth, if available: 18/03/1999 or certificate of age 25
- 7. Physical Fitness: Fit

I hereby certify that I have personally examined (Name) Sagar Patne  
Residing at \_\_\_\_\_ Son/ Daughter/Wife of Hari Patne  
Who is desirous of being employed in a construction work and his/her age as nearly as can be  
ascertained from examination is 25 years and that he/she is fit for employment in  
\_\_\_\_\_ as on adult / adolescent.

- 3. Reason for -
  - 1) Refusal of certificate \_\_\_\_\_
  - 2) Certificate being revoked \_\_\_\_\_
- i) Full medical and occupational history: No Any medical history

General physique \_\_\_\_\_  
General Examination: Good Blood Group: \_\_\_\_\_  
Physical Examination:  
Height: 5.3 Cms.  
Weight: 50 Kgs.  
Vision (Ophthalmic) test Rt: 6/6 Lt: 6/6  
Chest - Normal 91 Cms.  
Pulse: 88 / Min. Insp: 98 Cms.  
Hearing (ENT): \_\_\_\_\_ B.P.: 110/70 mm of Hg.  
Systemic Examination: NO Temp: 96.4 F  
RS: Clear CVS: S1 S2 0 CNS: NAD  
P/A: soft Urine: NO Bowel: NAD  
Any other tests which the examining doctor consider necessary: NO

Remark :- This is to certify that: Sagar Age: 25 Years has been examined by me and found physically fit and mentally sound to attend his duty. (As per our knowledge and till date situation)



DR. SANJAYKUMAR B. NIKAM  
MAHALUNGE (PUNE)  
Reg. No. - 004410112005

e/ Left hand thumb

Medical Officer

# SAI HOSPITAL

Talegaon Chakan road Mahalunge(I), Tal-Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 03/07/24

- Certificate Serial No: \_\_\_\_\_
- Name: Karnal siva
- Identification Mark a) \_\_\_\_\_  
b) \_\_\_\_\_
- Father's/ Husband's Name: Dam
- Sex: male
- Residence: mahalunge
- Date of Birth, if available: 26/03/2003 or certificate of age: 23
- Physical Fitness: fit

I hereby certify that I have personally examined (Name) Karnal  
Residing at mahalunge Son/ Daughter/Wife of Dam  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 23 years and that he/she is fit for employment in \_\_\_\_\_ as on adult / adolescent.

- Reason for -
  - 1) Refusal of certificate \_\_\_\_\_
  - 2) Certificate being revoked \_\_\_\_\_
- a) Full medical and occupational history: NO Any medical history

General physique: Good Blood Group: \_\_\_\_\_

General Examination  
Physical Examination

Height: 6.0 Cms.

Weight: 56 Kgs.

Vision(Ophthalmic) test Rt. 6/6 Lt. 6/6

Chest - Normal 81 Cms. Insp. 29 Cms.

Pulse: 77 / Min. B.P. 121/88 mm of Hg

Hearing (ENT) \_\_\_\_\_ Temp 96.4 F

Systemic Examination: NO

RS: clear CVS: S1 S2 ⊕ CNS: NAD

P/A: soft Urine: NO Bowel: NAD

- b) Any other tests which the examining doctor consider necessary: NO

Remark :- This is to certify that: Karnal Age: 23 Years has been examined by me and found physically fit and mentally sound to attend his duty. (As per our knowledge and till date situation)

DR. SANJAYKUMAR B. NIKAM  
M.B.S. (PUNE)  
Reg. No. - 004470-2024



Signature/ Left hand thumb

Medical Officer

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# SAI HOSPITAL

Talegaon Chakan road Mahalunge(I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 03/07/24

- Certificate Serial No: \_\_\_\_\_
- Name: Akash Bharudas Chormale  
Identification Mark a) \_\_\_\_\_  
b) male chest
- Father's/Husband's Name: Bharudas Chormale
- Sex: male
- Residence: mahalunge
- Date of Birth, if available: 13/07/1999 or certificate of age: 25
- Physical Fitness: fit

I hereby certify that I have personally examined (Name) Akash Chormale  
Residing at mahalunge Son/Daughter/Wife of Bharudas Chormale  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 25 years and that he/she is fit for employment in \_\_\_\_\_ as on adult / adolescent.

- Reason for -
  - 1) Refusal of certificate \_\_\_\_\_
  - 2) Certificate being revoked \_\_\_\_\_
- Full medical and occupational history: no any medical history

General physique: good Blood Group: \_\_\_\_\_

### General Examination

#### Physical Examination

Height: 5.4 Cms.  
Weight: 53 Kgs.  
Vision(Ophthalmic) test Rt. 6/6 Lt. 6/6  
Chest - Normal \_\_\_\_\_ Cms. Insp. \_\_\_\_\_ Cms.  
Pulse: 72 / Min. B.P. 120/80 mm of Hg.  
Hearing (ENT) N Temp- 96.8 F  
Systemic Examination NO  
RS: Clear CVS: S1S2+ CNS: NAD  
P/A: SOFT Urine: \_\_\_\_\_ Bowel: NAD  
Any other tests which the examining doctor consider necessary: NO

Remark :- This is to certify that : Akash Chormale Age : 25 Years has been examined by me and found physically fit and mentally sound to attend his duty.(As per our knowledge and till date situation)



DR. SANJAYKUMAR B. NIKAM  
M.B.B.S (PUNE)  
Reg. No. - 004701/2005

re/ Left hand thumb

Medical Officer

# SAI HOSPITAL

Talegaon Chakan road Mahalunge(I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 03/07/24

1. Certificate Serial No :  
2. Name: Himanshu Kumar  
Identification Mark a)  
b)  
3. Father's/ Husband's Name mahaveer Singh  
4. Sex male  
5. Residence: mahalunge

6. Date of Birth, if available 14/06/2005 or certificate of age 19  
7. Physical Fitness fit

I hereby certify that I have personally examined (Name) Himanshu Kumar  
Residing at Son/ Daughter/Wife of mahaveer Singh  
Who is desirous of being employed in a construction work and his/her age as nearly as can be  
ascertained from examination is 19 years and that he/she is fit for employment in  
as on adult / adolescent.

8. Reason for -  
1) Refusal of certificate  
2) Certificate being revoked  
a) Full medical and occupational history No Any medical History

General physique Good Blood Group -

### General Examination

#### Physical Examination

Height Cms.  
Weight Kgs.  
Vision(Ophthalmic) test Rt. 6/6 Lt. 6/6  
Chest - Normal 83 Cms. Insp. 86 Cms.  
Pulse 75 / Min. B.P. 110/80 mm of Hg.  
Hearing (ENT)

#### Systemic Examination

RS clear CVS S<sub>1</sub> S<sub>2</sub> CNS NAD  
P/A soft Urine Bowel NAD  
Any other tests which the examining doctor consider necessary No

Remark :- This is to certify that : Himanshu Age : 19 Years has been  
examined by me and found physically fit and mentally sound to attend his duty.(As per our  
knowledge and till date situation)



DR. SANJAYKUMAR B. NIKA  
M.B.S. (PUN)  
Reg. No. - 004210/2005

Medical Officer

e/ Left hand thumb

# SAI HOSPITAL

Talegaon Chakan road Mahalunge(I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 03/07

- Certificate Serial No: \_\_\_\_\_
- Name: Dombhary Thapa  
Identification Mark a) \_\_\_\_\_  
b) \_\_\_\_\_
- Father's/ Husband's Name: Arup Thapa
- Sex: Male
- Residence: Mahalunge
- Date of Birth, if available: 08/11/2001 or certificate of age: 29
- Physical Fitness: fit  
I hereby certify that I have personally examined (Name) Dombhary Thapa  
Residing at \_\_\_\_\_ Son/ Daughter/Wife of Arup Thapa  
Mahalunge  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 29 years and that he/she is fit for employment in \_\_\_\_\_ as on adult / adolescent.
- Reason for -
  - Refusal of certificate \_\_\_\_\_
  - Certificate being revoked \_\_\_\_\_
- a) Full medical and occupational history: No any medical history  
General physique: Good Blood Group: \_\_\_\_\_  
**General Examination**  
Physical Examination  
Height: 5' 8 Cms.  
Weight: 60 Kgs.  
Vision (Ophthalmic) test Rt. 6/6 Lt. 6/6  
Chest - Normal 81 Cms. Insp. 89 Cms.  
Pulse: 70 / Min. B.P. 112/88 mm of Hg.  
Hearing (ENT): \_\_\_\_\_  
Temp: 96.4  
Systemic Examination: NO  
RS: clear CVS: S1 S2 ⊕ CNS: NAD  
P/A: soft Urine: NO Bowel: NAD
- b) Any other tests which the examining doctor consider necessary: NO

Remark :- This is to certify that: Dombhary Age: 29 Years has been examined by me and found physically fit and mentally sound to attend his duty. (As per our knowledge and till date situation)



DR. SANJAYKUMAR B. N.  
M.B.B.S. (P)  
Reg. No. - 0044701120  
Medical Officer

Signature/ Left hand thumb

# SAI HOSPITAL

Talegaon Chakan road Mahalunge(D), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

- Certificate Serial No \_\_\_\_\_
- Name: Shilbhushan Bhaure Date: 3/07/21
- Identification Mark a) \_\_\_\_\_ b) \_\_\_\_\_
- Father's/ Husband's Name \_\_\_\_\_
- Sex: Male
- Residence: Bhaure Mahalunge
- Date of Birth, if available: 01/10/1984 or certificate of age 38
- Physical Fitness \_\_\_\_\_

I hereby certify that I have personally examined (Name) Shilbhushan Bhaure  
Residing at \_\_\_\_\_  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 38 years and that he/she is fit for employment in \_\_\_\_\_  
as on adult / adolescent.

- Reason for -
  - 1) Refusal of certificate \_\_\_\_\_
  - 2) Certificate being revoked \_\_\_\_\_
- Full medical and occupational history: no Any medical history

General physique good Blood Group \_\_\_\_\_  
**General Examination**  
Physical Examination  
Height 5.6 Cms.  
Weight 68 Kgs.  
Vision(Ophthalmic) test Rt. 6/6 Lt. 6/6  
Chest - Normal 72 Cms.  
Pulse 57 /Min. Insp. 95 Cms.  
Hearing (ENT) B.P. 110/70 mm of Hg.  
**Systemic Examination**  
RS clear CVS S1 S2P CNS NAD  
P/A soft Urine \_\_\_\_\_ Bowel NAD

Any other tests which the examining doctor consider necessary \_\_\_\_\_

Remark :- This is to certify that: Shilbhushan Age: 38 Years has been examined by me and found physically fit and mentally sound to attend his duty.(As per our knowledge and till date situation)



DR. SANJAYKUMAR B. NIKAM  
M.B.B.S. (PUNE)  
Reg. No. - 004761/2005

e/ Left hand thumb

Medical Officer

# SAI HOSPITAL

Talegaon Chakan road Mahalunge(I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

Form XXVIII

## CERTIFICATE OF MEDICAL EXAMINATION

Date: 03/07/24

1. Certificate Serial No: \_\_\_\_\_

2. Name: \_\_\_\_\_

Identification Mark a) \_\_\_\_\_

b) \_\_\_\_\_

3. Father's / Husband's Name \_\_\_\_\_

4. Sex male

5. Residence: \_\_\_\_\_

6. Date of Birth, if available \_\_\_\_\_

7. Physical Fitness \_\_\_\_\_

I hereby certify that I have personally examined (Name) Jitendra Rajbhav or certificate of age 29

Residing at \_\_\_\_\_

Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 29 years and that he/she is fit for employment in \_\_\_\_\_ as on adult / adolescent.

8. Reason for -

1) Refusal of certificate \_\_\_\_\_

2) Certificate being revoked \_\_\_\_\_

a) Full medical and occupational history No Any medical History

General physique \_\_\_\_\_

General Examination Good

Blood Group \_\_\_\_\_

Physical Examination

Height 5.3 Cms.

Weight 55 Kgs.

Vision(Ophthalmic) test Rt. 6/6 Lt. 6/6

Chest - Normal 82 Cms.

Pulse 80 / Min.

Insp. 85 Cms.

Hearing (ENT) \_\_\_\_\_

B.P. 120/75 mm of Hg.

Systemic Examination

RS clear

CVS S1 S2

CNS NAD

P/A soft

Urine \_\_\_\_\_

Bowel NAD

b) Any other tests which the examining doctor consider necessary NO

Remark :- This is to certify that : Jitendra Age : 29 Years has been examined by me and found physically fit and mentally sound to attend his duty.(As per our knowledge and till date situation)



DR. SANJAYKUMAR B. NIKAM  
M.B.B.S. (PUNE)

Reg. No. - 0044701/2005

Medical Officer

Signature/ Left hand thumb

# SAI HOSPITAL

Talegaon Chakan road Mahalunge (I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

1. Certificate Serial No :  
2. Name: Sandeep kisan Nagate Date: 03/07/24  
Identification Mark a) mark on left hand  
b)  
3. Father's/ Husband's Name kisan nagate  
4. Sex male  
5. Residence: mahalunge

Date of Birth, if available 03/10/1987 or certificate of age 37  
Physical Fitness fit  
I hereby certify that I have personally examined (Name) sandeep nagate

Residing at mahalunge Son/ Daughter/Wife of kisan nagate  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 37 years and that he/she is fit for employment in as on adult / adolescent.

Reason for -  
1) Refusal of certificate  
2) Certificate being revoked  
Full medical and occupational history no any medical history

General physique good Blood Group

General Examination  
Physical Examination  
Height 5.4 Cms.  
Weight 63 Kgs.  
Vision(Ophthalmic) test Rt. 6/6 Lt. 6/6  
Chest - Normal 85 Cms. Insp. 89 Cms.  
Pulse 74 / Min. B.P. 118/78 mm of Hg.  
Hearing (ENT) N  
Systemic Examination NO temp - 96.1 f  
RS clear CVS S1 S2 @ CNS NAD  
P/A soft Urine - Bowel NAD  
Any other tests which the examining doctor consider necessary NO

Remark :- This is to certify that : Sandeep Age : 37 Years has been examined by me and found physically fit and mentally sound to attend his duty.(As per our knowledge and till date situation)



DR. SANJAYKUMAR B. NIKAM  
M.B.B.S. (PUNE)  
Reg. No. - 0044701/2005

Left hand thumb

Medical Officer



# SAI HOSPITAL

Talegaon Chakan road Mahalunge(I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

1. Certificate Serial No :

2. Name:

Identification Mark a)

b)

3. Father's/ Husband's Name

4. Sex male

5. Residence:

6. Date of Birth, if available

7. Physical Fitness

I hereby certify that I have personally examined (Name) Akash Suiji  
Son/ Daughter/Wife of Ganga Bahadur Suiji  
Residing at mahalunge  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 19 years and that he/she is fit for employment in as on adult / adolescent.

8. Reason for -

1) Refusal of certificate

2) Certificate being revoked

a) Full medical and occupational history

General physique

General Examination

Physical Examination

Height 5.7 Cms.

Weight 55 Kgs.

Vision(Ophthalmic) test Rt.

Chest - Normal 76 Cms.

Pulse 78 / Min.

Hearing (ENT) N

Systemic Examination NO

RS clear

P/A soft

CVS

Urine

CNS

Bowel

b) Any other tests which the examining doctor consider necessary

Remark :- This is to certify that : Akash Suiji Age : 19 Years has been examined by me and found physically fit and mentally sound to attend his duty.(As per our knowledge and till date situation)



DR. SANJAY KUMAR  
M.B.B.S. PUNE  
Reg. No. - 0045701/2005

Signature/ Left hand thumb

Medical Office

# SAI HOSPITAL

Talegaon Chakan road Mahalunge (T), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 03/07/29

- Certificate Serial No: \_\_\_\_\_
- Name: \_\_\_\_\_  
Identification Mark a) Sidhdeshrar Rajendra Patil  
b) \_\_\_\_\_
- Father's/ Husband's Name: \_\_\_\_\_
- Sex: male
- Residence: Rajendra Mahalunge
- Date of Birth, if available: \_\_\_\_\_
- Physical Fitness: fit 1997 or certificate of age 27

I hereby certify that I have personally examined (Name) Sidhdeshrar Rajendra Patil  
Residing at Mahalunge Son/ Daughter/Wife of \_\_\_\_\_  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 27 years and that he/she is fit for employment in \_\_\_\_\_ as on adult / adolescent.

- Reason for -  
1) Refusal of certificate \_\_\_\_\_  
2) Certificate being revoked \_\_\_\_\_
- Full medical and occupational history: NO ANY MEDICAL HISTORY

General physique: Good Blood Group: \_\_\_\_\_

### General Examination

#### Physical Examination

Height: 6.0 Cms.

Weight: 70 Kgs.

Vision (Ophthalmic) test Rt. 6/6 Lt. 6/6

Chest - Normal 81 Cms. Insp. 89 Cms.

Pulse: 75 / Min. B.P. 120/80 mm of Hg.

Hearing (ENT): \_\_\_\_\_ Temp: 196.1 F

Systemic Examination: NO

RS: Clear CVS: S1 S2 ⊕ CNS: NAD

P/A: soft Urine: NO Bowel: NAD

- Any other tests which the examining doctor consider necessary: NO

Remark :- This is to certify that: Sidhdeshrar Age: 27 Years has been examined by me and found physically fit and mentally sound to attend his duty. (As per our knowledge and till date situation)



DR. SANJAYKUMAR B. NIKAM  
M.B.B.S. (PUNE)  
Reg. No. - 0047

Medical Officer

Signature/ Left hand thumb

# SAI HOSPITAL

# SAI HOSPITAL

Talagunda Taluk, Hassan road Mahalingu (H), Tal- Khol, Dist - Pune 410 501  
Reg No: TLR/PP-10001

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 04/07/24

1. Certificate Serial No. \_\_\_\_\_
2. Name: Gulambhusain mohammedi kram yarabji
3. Identification Mark as M
4. Father's / Husband's Name: \_\_\_\_\_
5. Sex: male
6. Residence: mohammadikram yarabji
7. Date of Birth, if available: 27/05/1997 or certificate of age: 27

I hereby certify that I have personally examined (Name) Gulambhusain  
Residing at mahalingu Son / Daughter / Wife of mohammadikram  
Who is desirous of being employed in a construction work and his/her age as nearly as can be  
ascertained from examination is 27 years and that he/she is fit for employment in  
as on adult / adolescent.

8. Reason for -
  - 1) Refusal of certificate \_\_\_\_\_
  - 2) Certificate being revoked \_\_\_\_\_
- a) Full medical and occupational history: NO any medical history

General physique: good Blood Group: B+

General Examination: \_\_\_\_\_  
Physical Examination: \_\_\_\_\_  
Height: 5.5 Cms.  
Weight: 50 Kgs.  
Vision (Ophthalmic) test Rt. 6/6 Lt. 6/6  
Chest - Normal 70 Cms.  
Pulse: 74 /Min. Insp. 76 Cms.  
Hearing (ENT): N B.P. 117/78 mm of Hg.  
Systemic Examination: NO Temp: 96.1 f  
RS: Clear CVS: S1 S2 (+) CNS: NAD  
P.A: SOFT Urine: \_\_\_\_\_ Bowel: NBD

- b) Any other tests which the examining doctor consider necessary \_\_\_\_\_

Remark :- This is to certify that: Gulambhusain Age: 27 Years has been  
examined by me and found physically fit and mentally sound to attend his duty. (As per our  
knowledge and till date situation)



DR. SANJAYKUMAR B. NIP  
M.B.B.S. (P)  
Reg. No. - 0044/01/2000

Medical Officer

Signature/ Left hand thumb

# SAI HOSPITAL

Talegaon Chakan road Mahalunge(D), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 3/07/21

- Certificate Serial No \_\_\_\_\_
- Name: Dnyaneshwar Verawade
- Identification Mark a) \_\_\_\_\_ b) \_\_\_\_\_
- Father's/Husband's Name: Pandurang Verawade
- Sex: male
- Residence: Mahalunge
- Date of Birth, if available: 3/12/1993 or certificate of age: 29
- Physical Fitness: Fit

I hereby certify that I have personally examined (Name) Dnyaneshwar  
Residing at Mahalunge Son/ Daughter/Wife of Pandurang  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 29 years and that he/she is fit for employment in \_\_\_\_\_ as on adult / adolescent.

Reason for -  
1) Refusal of certificate \_\_\_\_\_  
2) Certificate being revoked \_\_\_\_\_  
Full medical and occupational history: NO Any medical history

General physique: good Blood Group: \_\_\_\_\_

**General Examination**  
Physical Examination  
Height: 55 Cms.  
Weight: 59 Kgs.      6/6 Lt      6/6  
Vision(Ophthalmic) test Rt.      6/6 Lt      6/6  
Chest - Normal 76Cms.      Insp. 85 Cms.  
Pulse: 57 /Min.      B.P. 112/70 mm of Hg.  
Hearing (ENT) \_\_\_\_\_  
Systemic Examination: NO  
RS: clear      CVS: S, S2      CNS: ROAD  
P/A: SOFT      Urine: \_\_\_\_\_      Bowel: \_\_\_\_\_  
Any other tests which the examining doctor consider necessary: \_\_\_\_\_

Remark :- This is to certify that : Dnyaneshwar Age : 29 Years has been examined by me and found physically fit and mentally sound to attend his duty.(As per our knowledge and till date situation)



DR. SANJAY KUMAR B. NIKAM  
Reg. No - 004101/2005

Left hand thumb

Medical Officer

# SAI HOSPITAL

Talegaon Chakan road Mahalunge (I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

1. Certificate Serial No: \_\_\_\_\_  
2. Name: Anish Kumar Ram Date: 9/07/24  
Identification Mark a) \_\_\_\_\_  
b) \_\_\_\_\_  
3. Father's/ Husband's Name: Birendra  
4. Sex: male  
5. Residence: Mahalunge  
6. Date of Birth, if available: 01/01/2004 or certificate of age: 21  
7. Physical Fitness: fit

I hereby certify that I have personally examined (Name) Anish  
Residing at Mahalunge Son/ Daughter/Wife of Birendra  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 21 years and that he/she is fit for employment in \_\_\_\_\_ as on adult / adolescent.

8. Reason for -  
1) Refusal of certificate \_\_\_\_\_  
2) Certificate being revoked \_\_\_\_\_  
a) Full medical and occupational history: no any medical history

General physique: good Blood Group: \_\_\_\_\_

### General Examination

#### Physical Examination

Height: 5.0 Cms.

Weight: 49 Kgs.

Vision (Ophthalmic) test Rt. 6/6 Lt. 6/6

Chest - Normal 72 Cms.

Pulse: 58 / Min.

Insp. 95 Cms.

B.P. 110/50 mm of Hg.

#### Hearing (ENT)

#### Systemic Examination

RS: clear

CVS: S1 S2

CNS: NAD

P/A: SOTI

Urine: \_\_\_\_\_

Bowel: \_\_\_\_\_

- b) Any other tests which the examining doctor consider necessary \_\_\_\_\_

Remark :- This is to certify that: Anish Age: 21 Years has been examined by me and found physically fit and mentally sound to attend his duty. (As per our knowledge and till date situation)



DR. SANJAY KUMAR B.

M.B.B.S.

Reg. No. - 0044/01/2

Signature/ Left hand thumb

Medical Office

# SAI HOSPITAL

Talegaon Chakan road Mahalunge(I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

1. Certificate Serial No :

2. Name:

Identification Mark a)

b)

3. Father's/ Husband's Name

4. Sex

5. Residence:

6. Date of Birth, if available

7. Physical Fitness

I hereby certify that I have personally examined (Name)

Residing at

Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is

8. Reason for -

1) Refusal of certificate

2) Certificate being revoked

a) Full medical and occupational history

General physique

General Examination

Physical Examination

Height

Weight

Vision(Ophthalmic) test Rt.

Chest - Normal

Pulse

Hearing (ENT)

Systemic Examination

RS

P/A

CVS

Urine

CNS

Bowel

b) Any other tests which the examining doctor consider necessary

Remark :- This is to certify that : Sachin Age : 23 Years has been examined by me and found physically fit and mentally sound to attend his duty.(As per our knowledge and till date situation)



DR. SANJAYKUMAR B. NIKAM  
M.B.B.S. (PUNE)  
Reg. No. - 002112007  
Medical Officer

Signature/ Left hand thumb

# SAI HOSPITAL

Talegaon Chakan road Mahalunge (I), Tal- Khed, Dist - Pune 410 501  
Reg No: 713(ZP-pune)

## CERTIFICATE OF MEDICAL EXAMINATION

Form XXVIII

Date: 04/07/20

- Certificate Serial No : \_\_\_\_\_
- Name: Suraj Gajanan padol
- Identification Mark a) \_\_\_\_\_ b) \_\_\_\_\_
- Father's/ Husband's Name Gajanan padol
- Sex male
- Residence: mahalunge
- Date of Birth, if available 21/06/2000 or certificate of age 24
- Physical Fitness fit

I hereby certify that I have personally examined (Name) Suraj padol  
Son/ Daughter/Wife of Gajanan padol  
Residing at \_\_\_\_\_  
Who is desirous of being employed in a construction work and his/her age as nearly as can be ascertained from examination is 24 years and that he/she is fit for employment in \_\_\_\_\_ as on adult / adolescent.

- Reason for -
  - Refusal of certificate \_\_\_\_\_
  - Certificate being revoked \_\_\_\_\_
- Full medical and occupational history No any medical histo

General physique Good Blood Group A+

### General Examination

#### Physical Examination

Height 54 Cms.

Weight 65 Kgs.

Vision(Ophthalmic) test Rt. 6/6 Lt. 6/6

Chest - Normal 35 Cms. Insp. \_\_\_\_\_ Cms.

Pulse 98 / Min.

B.P. 120/80 mm of Hg.

Hearing (ENT) 7.2 f

#### Systemic Examination

RS clear CVS S1 S2 @ CNS NAD

P/A soft Urine NO Bowel NO

- Any other tests which the examining doctor consider necessary NO

Remark :- This is to certify that : Suraj Age : 24 Years has been examined by me and found physically fit and mentally sound to attend his duty.(As per our knowledge and till date situation)



DR. SANJAYKUMAR B. I  
M.B.B.S. (I)  
Reg. No. - 004401/2

Signature/ Left hand thumb

Medical Offi