

MEDICAL CERTIFICATE OF FITNESS TO RETURN DUTY

Signature of Government Servant

I,do hereby certify

That We/I have carefully examined Sri/Smt./Dr

.....

Whose signature is given above, and find that he/she has recovered from his/her illness

and is now fit to resume duties in Government service with effect

from.....

We/I also certify that before arriving at this decision,

We/I have examined the original medical certificate (s) and statement (s) of the case

(Or certified copies thereof) on

Which leave was granted or extended and have taken these into consideration in arriving

at our/my decision.

Authorized Medical Attendant

Name:

Date:

Designation:

Seal: