



CHRIST APOSTOLIC CHURCH THEOLOGICAL SEMINARY ILES A CAMPUS, ILESA

BABAJIDE SCHOOL OF PROPHETS AND EVANGELISTS

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MEDICAL CERTIFICATE OF FITNESS FOR SCHOOL RESUMPTION

This is to medically certify that _____
has been medically examined and investigated.

He/She is found to be physically fit and free /not free from any infectious diseases.

HE/SHE HAS THE FOLLOWING LABORATORY RESULTS

PVC/Hb Concentration: _____

Genotype: _____

Blood Group and Rhesus Factor: _____

Full Blood Count: _____

Urine Protein: _____

Urine Glucose: _____

Urine M/CLS: _____

Stool O/P: _____

Pregnancy Test: _____

Chest X-Ray: _____

Hepatitis Screening: _____

Visual Acuity Test: _____

Retroviral Screening Test: _____

Blood Pressure: _____

Height: _____

Weight: _____

General Physical Examination: _____

Mental/Psychological State: _____

FOR OFFICIAL USE ONLY: GOVERNMENT HOSPITAL

HE/SHE IS NOW CERTIFIED / NOT CERTIFIED MEDICALLY FOR SCHOOL RESUMPTION _____

NAME OF EXAMINING DOCTOR _____

SIGNATURE AND STAMP _____

DATE: _____ PHONE NUMBER: _____