भारतीय मानक ब्यू	रो	CANDIDATE'S STATE		HR	8				
BUREAU OF IND	IAN STANDARDS	DEC	LARATION		U				
The candidate must make the statement required below prior to his/her medical examination, and must sign the Declaration appended thereto. His/her attention is specially directed to the warning contained in the note below:									
1. State your nam	1. State your name in full (in block letters)								
2. State your age	State your age and birth place								
3. a) Do you belong to races such as Gorkhas, Garhwalies, Assamese, Nagaland Tribals, etc. whose average height is distinctly lower. Answer 'Yes' or 'No' and if 'Yes', state the name of the Tribe/Race									
3. b) Have you ever had small-pox intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis? OR Any other disease or accident requiring confinement to bed and medical or surgical treatment?									
4. When were you	When were you last vaccinated?								
5. Have your suffered from any form of nervousness due to over-work or any other cause?									
	owing particulars concerning e Father's age at death an								
Father's age if living, stat of health	No. of brothe ages at death death								
Mother's age if living, sta of health	te Mother's age at death ar cause of death	nd No. of sisters living, their ages and state of health	No. of sisters ages at death death						
7. Have you been examined by a Medical Board before?									
8. If answer to the above is 'Yes', please state what service(s) you were examined for:									
9. Who was the examining authority?									

10.	10. Where was the Medical Board held?							
11.	11. Result of the Medical Board's examination, if communicated to you or if you know							
All 1	All the above answers are to the best of my belief, true and correct.							
	Candidate's Signature							
	Signed in my presence							
				Cia	natura of	the Chairman of the Deard		
Not	a: The condidate will be	hold rooms	nsible for the ecc			the Chairman of the Board		
info	rmation he/she will inc	ur the risk				By willfully suppressing any , of forfeiting all claims to		
sup	erannuation Allowance a	nd Gratuity.						
		RE	PORT OF THE	MEDICAL BOAR	RD			
Nar	me of the candidate							
Phy 1.	sical Examination	Good		Fair		Poor		
1.								
	Nutrition Height	Thin		Average Obese without shoes		Obese		
	Weight		best weight	without shoes	when			
	Any recent change in w			ure				
	Girth of Chest:		Il inspiration		b) After full expiration			
2.	Skin: Any obvious dis	sease:						
3.								
	a) Any disease							
	b) Night	ion						
	c) Defect in Colour Visiond) Field of Vision							
	e) Visual Acuity							
	f) Fundus Examination							

Acute of Vision		Naked Eye	e With Glasses		Strength of Glasses				
							Sph.	Cyl.	Axis
Distant Vision		RE							
		LE							
Near	Vision	RE							
		LE							
Llunor	matrania	RE							
(Mani ⁻	[·] metropia fest)								
(LE							
4.	Ears:								
4.	a) Insection								
	b) Hearing: Right Ear Left Ear								
_	Oleveda				-				
5.	Glands				Thyro	DIC			
6.	Condition of te	eth							
7.	Respiratory sys	stem							
			on reveal anything	abnormal ir	the re	spiratory or	gans?		
			, ,				•		
	If yes, explain fu	lly							
8.	Circulatory sys	tem							
	a) Heart: Any or	rganic les	sions?						
	Rate: St	anding							
		pping 25							
	2 minutes after hopping								
	b) Blood pressure Systolic Diastolic								
9.	Abdomen:	Girth		Tenderness		Hernia			
	a) Palpable: Liver			Spleen		Kidneys			
	b) Tumors c) Hemorrhoids Fistula								
10.									
10.	Nervous system: Indications of nervous or mental disabilities								
11.	Loco-motor system: any abnormality								
<u> </u>									
12.	General urinary system								
	a) Any evidence of Hydrocele, Varicocele, etc.								

	b) Urine analysis							
	Physical appearance	Sp. Gr.		Albumin				
	Sugar	Casts		Cells				
13.	Report of screening/X-ray examination of chest							
14.	Is there anything in the health of the candidate likely to render him/her unfit for the efficient discharge of his/her duties in the service of which he/she is a candidate? Note: In the case of female candidate, if it is found that she is pregnant of 12 weeks standing or over, she should be declared temporarily unfit, vide Regulation 9.							
15.	i) State the Services for which the candidate has been examined:							
	a) Indian Administrative Se		U U					
	b) IPS & Delhi, Himachal Pi		rvice					
	c) Other Central Services, Class I & II							
	d) Indian Forest Service							
	ii) Has he/she been found qualified in all respects for the efficient and continuous discharge of his/her duties in							
	a) Indian Administrative Service and Indian Foreign Service							
	 b) IPS & Delhi, Himachal Pradesh Police Service (see especially height, weight, chest girth, eye sight, colour blindness and locomotive system) 							
	 c) Transportation, Traffic ar c) Other Central Services, 0 		epartments of the Indu	an Railways				
	· · ·							
	d) Indian Forest Service							
	iii) Is the candidate fit for FIELD SERVICE? Note: The Board should record their findings under one of the following three categories:							
	a) Fit							
	b) Unfit on account of							
	c) Temporarily unfit on account of							
Chairman			Member					
Memt	ber		Member					
Place Date								