AP Factories Rules FORM NO. 5

ENDORSEMENTS

Prescribed Under Rule 14

Certificate of Fitness

Photo

1.	Name & Address of the Factory	:
2.	Serial No.	:
3.	Name	:
4.	Father's Name	:
5.	Sex	:
6.	Residence	:
7.	Date of Birth / or certified age	:
8.	Physical Fitness	:
9.	Descriptive marks	:
10.	If already employed, Nature of work	:
11.	Raw materials or by products handled	:
12.	Date of employment on present work	:
13.	Result of last Medical Examination, if any	:
14.	Result of present Medical Examination/Symptoms and signs observed.	:
15.	If suspended from work, state period of suspension with detailed reasons	:
16.	If recertified, fit to resume duty on	:
17.	If Certificate of unfitness or suspension issued to worker	:
18.	Date of leaving or transfer with reasons for discharge or transfer	:
19.	Certificate extended upto	:
20.	He is advised following further examination/treatment	:

His/Her descriptive marks

Signature of Certifying Surgeon.

Signature/Thumb Impresion of worker.

22. Reasons for

1. refusal of certificate

2. Certificate being revoked.

Place:

Date :

Signature of Certifying Surgeon"