

FORM OF MEDICAL CERTIFICATE

STANDARD OF VISION

(To be filled by an Ophthalmologist in Government Service)

1) Is there any defect of vision?

If so, has it been corrected by suitable spectacles so that the distant vision is 6/6 snellen and near vision is 0.5 snellen

2) Can the applicant readily distinguish the pigmentary colours red and green?

3) Does the applicant suffer from any night blindness?

I have this day, medically examined Sri.

(Name and address) and found that he has no defect of vision which would render him unsuitable for the post of Police Constable Driver and his standards of vision are as follows.

Standards of Vision

(Eye sight without glasses)

Right Eye

Left Eye

1) Distant VisionSnellenSnellen

2) Near Vision SnellenSnellen

3) Field of Vision

(Specify whether full or not. Entry 'Normal', 'Good' etc. will be inappropriate)

4) Colour Vision

5) Squint

6) Any morbid conditions of the eyes or lids of either eye

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His standards of vision are fit for the post of Police Constable Driver

I certify to the best of my knowledge and belief that the applicant

Sri. is the person herein above described and that the attached photograph has reasonably correct likeness. (The signature of the Ophthalmologist shall be affixed on the photograph leaving the face clear)



Place:

Date:

Signature

Name & Designation of Medical Officer

Office Seal

Note: Specification for each eye should be stated separately. Vague statements such as vision normal, Good etc will not be accepted.

