

PANCHSHEEL BALAK INTER COLLEGE

Sector-91, Noida, G. B. Nagar

MEDICAL FITNESS FORM

2024-25

Name.....Admission No.....

Father's

Name.....Class.....Age.....

S. NO.	OBSERVATION	
1	Weight	
2	Height	
3	Blood Group*	
4	Haemoglobin*	
5	Skin	
6	Teeth	
7	Ear	
8	Nose	
9	Throat	
10	Nails	
11	Tongue	
12	Eyes	
13	Lymph Nodes*	
14	Chest	
15	If Any Allergic Drug Pls describe	
16	If Any Chronic Disease Pls describe	
17	Copy of Vaccination Certificate	
18	Remarks	

Sign. of Parent/Guardian

Sign. of Medical Officer

Performa For Affidavit on Rs 10 Stamp Paper

1. My name is.....and my son's name is.....
Residing at.....
who has taken admission in..... class at Panchshell Balak Inter College, Sec.-91, Noida, U.P. (201301).
2. If my son escapes from the college/hostel without any permission of college authority and show disobedience then we will be totally responsible for his act & the decision of college will be acceptable.
3. We will submit college fess at the given time. If the fees is not submit at the given time, then we will be responsible for the deposition of any additional fine imposed on us.