

ANNEXURE

CERTIFICATE OF PHYSICAL FITNESS

(to be issued by a Medical Officer not below the rank of Asst. Civil Surgeon of a Govt. Hospital)

Signature of the Candidate:_____

I hereby certify that I have medically examined/ tested Shri_____ S/o. _____ is a candidate being considered for the post(s) of FIREMAN -A/ Driver Cum Operator 'A'/ Sub Officer against Advt. No.SDSC SHAR/RMT/03/2018 in Satish Dhawan Space Centre SHAR, Indian Space Research Organisation, Department of Space, Government of India and found him satisfying the minimum physical fitness standards indicated below and his actual standards are written below. I also certify that he does not have any of the disqualifications mentioned at Sl. No.7 to 10 and each eye is having full field of vision.

S.No.	Description	Min. Std. required	Actual Standards
01	Height	165 Cms	
02	Weight	50 Kgs	
03	Chest (Normal)	81 Cms	
04	Chest (on expansions)	86 Cms	
05	Distant Vision	6/6 without wearing glasses or any other aid	
06	Near Vision	Normal	
07	Night Blindness is a disqualification		
08	Colour Blindness is a disqualification		
09	Squint or any other morbid condition of the eyes, or of the eyelids of either eye liable to the risk of aggravation or recurrence, shall be deemed to be a disqualification.		
10	No deformity (inter alia, bow legs, Knock Knees or flat foot shall be a disqualification)		

Date :
seal

Signature of the Medical Officer with