

**ICMR-NATIONAL CENTRE FOR DISEASE INFORMATICS AND RESEARCH
Bengaluru**

FORM – 5

[See Rule – 24(3)]

MEDICAL CERTIFICATE OF FITNESS TO RETURN TO DUTY

Signature of the Government Servant :

We, the members of Medical Board

I Civil Surgeon/Staff Surgeon,
Authorized Medical Attendant, } of
Registered Medical Practitioner

do hereby certify that we/I have carefully examined Shri/Shrimati/Kumari
..... whose signature is given above, and find that he/she
has recovered from his/her illness and is now fit to resume duties in Government Service.
We/I also certify that before arriving at this decision, we/I have examined the original
medical certificate(s) and statement(s) of the case (or certified copies thereof) on which leave
was granted or extended and have taken these into consideration in arriving at our/my
decision.

Members of the Medical Board

(1)

(2)

(3)

Civil Surgeon/Staff Surgeon,

Authorized Medical Attendant,

Registered Medical Practitioner

Dated