**Form – 5**

[Rule 24 (3)]

**Medical Certificate of Fitness to Return to Leave**

Signature of the Government Servant ………………………………………………

We, the members of Medical Board,

We/I Dr.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Civil Surgeon/Staff Surgeon, AMA/RMP do here by certify that We/I have carefully examined Dr. / Sri / Smt. / Kumari \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ whose signature is given above and find that he/she recovered from his/her illness and is now fit to resume duties on \_\_\_\_\_\_\_\_\_\_\_\_\_ 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 considerations in arriving at my decision/Member of the Medical Board.

Members of the Medical Board

(1)…………………………….

(2) ……………………………

(3) ……………………………

Civil Surgeon/Staff Surgeon/ Authorized Medical Attendant/ Registered Medical Attendant

Dated:…………………..

Note: The original medical certificate(s) and statement(s) of the case on which the leave was originally granted shall be produced before the authority required to issue the above certificate. For this purpose, the original medical certificate(s) and statement(s) of the case should be prepared in duplicate, one copy being retained by the Government servant concerned.