

**FORM:4**

**MEDICAL CERTIFICATE FOR LEAVE OR EXTENSION OF LEAVE OR  
COMMUTATION OF LEAVE**

Signature of the Government servant .....

I .....after careful personal examination of the case hereby certify that  
Shri/Smt./Kumari .....whose signature is given above as suffering from  
..... and I consider that period of absence from duty of ..... with  
effect from ..... is absolutely necessary for the restoration of his / her health.

Authorised Medical Attendant  
.....Hospital/  
Dispensary of other Registered  
Medical Practitioner .

Dated: .....

NOTE I: *The nature and probable duration of the illness should be specified.*

NOTE II: *This form should be adhered to as closely as possible and should be filled in after the signature of the Government servant has been taken. The certifying Officer is not at liberty to certify that the Government servant requires a change from or to a particular locality, or that he is not fit to proceed to a particular locality. Such certificates should only be given at the explicit desire of the administrative concerned, to whom it is open to decide, when an application on such grounds has been made to him, whether the applicant should go before a Civil Surgeon or Staff surgeon to decide the question of his / her fitness for service.*

NOTE III: *Should a second medical Opinion be required, the authority competent to grant leave should arrange for the second medical examination to be made at the earliest possible date by a medical officer not below the rank of a Civil Surgeon or Staff Surgeon, who shall express an opinion both as regards the facts of illness and as regards the necessity for the amount of the leave recommended and for this purposed he may either require the Government servant to appear before himself or before a medical officer nominated be himself.*

NOTE.IV: *No recommendation contained in this certificate shall be evidence of a claim to any leave not admissible to the Government servant.*

**FORM:5**

Signature of the Government servant .....

We , the members of Medical Board.

I, ..... Civil Surgeon / Staff Surgeon  
.....  
Authorised Medical Attendant  
.....  
Registered Medical Practitioner.

do hereby certify that we / I have carefully examined Shri/Smt./Kumari .....  
whose signature is given above. and find that he / she recovered from his / her illness and is  
now fit to resume duties in Government servant. We / I also certify that before arriving at this  
decision, We / I have examined the original certificate(s) and statement(s) of the case (or  
certified copies thereof) pm 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,  
.....  
Authorised Medical Attendant.  
.....  
Registered Medical Practitioner  
.....

Dated:.....

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

FORM 3

(See Rule 19)

**MEDICAL CERTIFICATE FOR GAZETTED OFFICERS  
RECOMMENDED LEAVE OR EXTENSION OF LEAVE OR  
COMMUTATION OF LEAVE**

Signature of the Government servant .....

I, ..... after careful personal examination of the case hereby certify that Shri/Shrimati/Kumari ..... whose signature is given above, is suffering from ..... and I consider that a period of absence from duty of ..... with effect from ..... is absolutely necessary for the restoration of his/her health.

Civil Surgeon/Staff Surgeon/  
Authorised Medical Attendant

Dated : .....

.....Dispensary

NOTE : 1. This form should be adhered to as closely as possible and should be filled in after the signature of the Government servant has been taken. The certifying officer is not at liberty to certify that the Government servant requires a change from or to a particular locality or that he is not fit to proceed to a particular locality. Such certificates should only be given at the explicit desire of the administrative authority concerned to whom it is open to decide, when an application on such grounds has been made to him, whether the applicant should go before a (Civil Surgeon/Staff Surgeon/Authorised Medical Attendant) to decide the question of his/her fitness for service.

NOTE : 2. No recommendation contained in this certificate shall be evidence of a claim to any leave not admissible to the Government servant.