



SABARAGAMUWA UNIVERSITY OF SRI LANKA  
FACULTY OF APPLIED SCIENCES

B.SC. (HONS) IN SPORT SCIENCES & MANAGEMENT  
&  
B.SC. (HONS) IN PHYSICAL EDUCATION

**CERTIFICATE OF PHYSICAL FITNESS TO BE ISSUED BY A MEDICAL OFFICER**

I do hereby certify that I have examined Mr. /Ms. ...., candidate for admission to the B.Sc. degree programmes in Department of Sports Sciences and Physical Education, cannot discover that he/she has any disease, constitutional affection or bodily infirmity except, .....

He/ She has marks of small-pox vaccination.....

**Personal marks of identification**

- |                          |                            |
|--------------------------|----------------------------|
| a) Age: .....            | b) Height: .....           |
| c) Weight: .....         | d) Acuity of vision: ..... |
| e) Blood Pressure: ..... | f) Heart Rate: .....       |

**Recommendation**

- ☐ Cleared for all spots without restriction
- ☐ Cleared for all sports without restriction with recommendations for further evaluation or treatment for .....

**Not Cleared**

- ☐ for any sport
- ☐ for certain sports.....

Reason: .....

Any Special Notes: .....

**N.B.:** Any defect or deformity or other disabilities (including other injuries) when present should be noted in detail without fail by the certifying Medical Officer. In case where sight is corrected with glasses, the power of glasses for each eye should be noted.

Designation:

Signature :

Date:

Name :

Frank :

*Note: The candidate is completely liable for all the particulars given here*