



## HEALTH FORM

Full name: \_\_\_\_\_ Male/Female: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Permanent address: \_\_\_\_\_

## HEALTH STATUS

History of diseases: \_\_\_\_\_

Body: Height: \_\_\_\_\_ Chest: Inhalation: \_\_\_\_\_

Weight: \_\_\_\_\_ Exhalation: \_\_\_\_\_

Average: \_\_\_\_\_

Circulatory system: Blood pressure: \_\_\_\_\_ Pulse: \_\_\_\_\_ Heart: \_\_\_\_\_

Sight: - Left Eye: \_\_\_\_\_ Right Eye: \_\_\_\_\_

Hearing: - Left ear: \_\_\_\_\_ - Right ear: \_\_\_\_\_

Lungs: \_\_\_\_\_

Digestive system: \_\_\_\_\_

Sexual organs and urinary system: \_\_\_\_\_

Surgery: \_\_\_\_\_

Skin diseases: \_\_\_\_\_

Ear: \_\_\_\_\_

Nose: \_\_\_\_\_

Throat: \_\_\_\_\_

Teeth: \_\_\_\_\_

Conclusion: (Doctors decision to recommend that the child is fit to study).

\_\_\_\_\_

HCMC, Date \_\_\_\_\_ Month \_\_\_\_\_ Year 200 \_\_\_\_\_

Doctor

(Signature and full name)

*A member of: A partner of:*



Suffolk University,  
Boston,  
MA, USA



Asia Pacific University,  
Japan



EF Education First,  
Boston,  
USA



Ritsumeikan University,  
Japan



Truman State University,  
MO, USA



James Cook University,  
Brisbane,  
Australia



King's College London,  
UK



Buckinghamshire New University,  
UK