

**CERTIFICATE OF FITNESS TO RETURN TO DUTY**

Signature of the candidate

I \_\_\_\_\_ do hereby certify that I have carefully examined  
of the \_\_\_\_\_ Department whose

signature is given above and that he/she has recovered from his/her illness and is now fit to resume duties in Government Service from

I also certify that before arriving at this decision I have examined the original certificate (s) and statement (s) of the case or certified copies thereof which leave was granted or extended and have taken these into consideration in arriving at my decision.

**STATION:**

\_\_\_\_\_ 200

**Authorised Medical Attendant**

**No.            Reg.**