



Lakka BFG/7287/2018  
Guyyaa 7/12/18

### Medical Certificate

Name Abduljeta Ahmed

Sex M Age 32



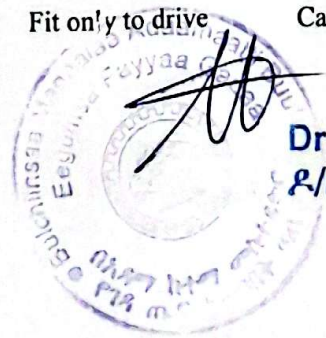
Occupation \_\_\_\_\_ Date of Examination 7/12/2018

Grand and category of driving license Requested								M1	M2	A	T1	T2	P1	P2	P3
FD1	FD2	FD3	FL1	FL2	SM1	SM2									
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Examination	Normal	Defective		Remark	
		Rt	Lt		
1. Vision Test	<input type="checkbox"/>	<input checked="" type="checkbox"/> 6/8	<input checked="" type="checkbox"/> 6/8	/ NAD	
2. Sound perception	<input type="checkbox"/>	<input checked="" type="checkbox"/> A/A	<input checked="" type="checkbox"/> A/A		
3. Epilepsy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4. Mental Defect	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5. Blood Test	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		A true
6. Diabetes Test	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		NAD
7. Urine and kidney	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Physical Examination	<u>well looking</u>				

#### Witness Recommendation

Fit to drive all Vehicle  Total unfit  
 Fit only to drive Category (be granted) \_\_\_\_\_



**Dr Meron Ajeme**  
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