



Baptist Theological Seminary

1023 Upper Serangoon Road Singapore 534761 ♦ Ph: (65) 6472-0091 ♦ Fax: (65) 6472-0071

Strictly Confidential

MEDICAL EXAMINATION FORM

Name (per Passport): _____ Date of Birth: _____

Address: _____

Weight: _____ Height: _____

I. Medical History (serious illness, infections, operations):

II. Clinical Examination

General Condition			
Ears		Eyes	
Skin			
Breasts (female students)			
Other remarks:			
Cardiovascular System			
Heart			
Pulse		Blood Pressure	
Respiratory System			
Nose			
Lungs			
Nervous System			
Remarks:			
Alimentary System			
Mouth & Pharynx		Teeth	
Abdomen			

Name of Examining Doctor: _____

Address: _____

I certify that: _____ has been examined by me and there is no significant physical or mental illness that will adversely affect his/her studies.

Signature: _____ Date: _____

CONFIDENTIALITY POLICY: All information provided by the applicant will be confidential and used solely for the purpose of application for admission and Seminary's records.

Applicants must also undergo a medical examination including a Chest X-ray (to detect tuberculosis) and HIV blood test on the next page. This is a requirement of the Immigration and Checkpoints Authority of Singapore ("ICA") to issue a Student's Pass visa to international students in Singapore. The student may need to repeat the tests subsequently for the purpose of submission to ICA.

MEDICAL EXAMINATION REPORT

For New Applicants:

1. The Medical Examination may be done in Singapore by any registered General Practitioner (GP). Applicants who are in their home countries/places of residence may have their Medical Examination and HIV test done in their home countries/places of residence at any medical clinic licensed to carry out such tests. If HIV testing is done in Singapore, it may be carried out with either rapid or ELISA tests.

For Renewal Applicants:

1. The Medical Examination **MUST** be done in Singapore by any registered GP. HIV testing may be done with either rapid or ELISA tests.

Notes for All:

1. This Medical Examination Report is to be completed by a registered doctor and returned to the examinee. The original copy of the laboratory report for HIV and the X-ray report must be attached to this Medical Examination Report only if the medical examination and testing is carried out overseas.

2. The laboratory report for HIV and the X-ray report submitted to the Immigration & Checkpoints Authority should be within **THREE MONTHS** from the date of the issue of the reports.

I Personal Particulars

1. Name (as in the passport): _____
2. Sex: M / F 3. Date of Birth: _____ 4. Nationality/Citizenship: _____
3. Passport No.: _____ 6. FIN (if applicable):

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7. Address in Singapore: _____

II Medical Examination

I certify that the above-named has undergone a chest x-ray and the result of his/her chest X-ray is as indicated (with a [√]):-

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. TB (Chest X-ray)*
Any evidence of active TB detected?
[*Pregnant Women are exempted from Chest X-Ray] | <input type="checkbox"/> | <input type="checkbox"/> |

I certify that I have tested the above-named and the result of his/her HIV test is indicated below (with a tick [√]):-

- | | Positive | Negative/ Non-Reactive |
|----------|--------------------------|--------------------------|
| 2. HIV : | <input type="checkbox"/> | <input type="checkbox"/> |

Name of Examining Doctor (IN BLOCK LETTERS): _____

Signature : _____ Clinic's Stamp & Address: _____

Date: _____ Telephone Number : _____

MCR no: _____

NOTE: For persons screened overseas, the name in the laboratory report for HIV and the X-ray report must be according to the name shown in the Passport.

DECLARATION Not required

I, _____ (name) declare that the above is not applicable to me as
I have submitted a medical report** containing the above information to Immigration & Checkpoints Authority, Ministry of Manpower (not more than two years ago) when I was granted the _____ (pass type)
on _____ (dd/mm/yy) valid till _____ (dd/mm/yy).

Signature & Date

** Those who were previously exempted from submitting the X-ray report because of pregnancy are required to submit a X-ray report certified by a Singapore registered GP, if you are not pregnant now.
*** Delete where necessary.

WARNING:

**IT IS AN OFFENCE UNDER THE IMMIGRATION ACT
TO MAKE ANY FALSE STATEMENT, REPRESENTATION OR DECLARATION**