

MEDICAL FITNESS APPEAL
FOR ENROLLMENT IN BASIC COURSE, ENROLLMENT
For use of this form, see AR 145-1; the proponent agency is ODSCPER

DATE

I have examined _____ and find no medical
(First Name - Middle Initial - Last Name)
condition or physical impairment which precludes his participation in the basic course, Army ROTC, a
program or other educational program in a normal college educational program.

SIGNATURE OF PHYSICIAN