PREPARTICIPATION PHYSICAL EVALUATION CLEARANCE FORM

Name			Sex D M	□ F Age	Date of birth
	r all sports without restriction				
Cleared for all sports without restriction with recommendations for further evaluation or treatment for					
□ Not cleared	d				
	Pending further evaluation				
	For any sports				
	For certain sports				
	Reason				
Recommendat			«ميندان»، برازمور»، ميند، برازمور»، ويورد الميندان، ويورد الميندان، ويورد الميندان، ويورد الميندان، ويورد الم		
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I have examined the above-named student and completed the preparticipation physical evaluation. The athlete does not present apparent clinical contraindications to practice and participate in the sport(s) as outlined above. A copy of the physical exam is on record in my office					
					ter the athlete has been cleared for participation,
					sequences are completely explained to the athlete
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Signature of ph	nysician				, MD or DO
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