



ALMANSOORI SPECIALIZED ENGINEERING

EMPLOYEE HEALTH FITNESS CERTIFICATE

NAME : EMP. NO.:

DIVISION : DATE:

DESIGNATION : CATEGORY: 1 2 3 4

I, _____, hereby confirm that I've received induction on AlMansoori Health Monitoring System and informed by the HSEQ Department on my medical conditions as per my last medical report.

I've been kindly advised by the HSEQ representative on steps how to rectify my health problems and improve my general health condition following medical report and Doctor recommendations. Also, I've been advised on measures must be taken by me to avoid occupational and general health problems in future.

I've been asked to visit the HSEQ Department in a while (3 months) to evaluate the progress done.

I understand; that the Company as strictly confidential will treat this information at all time.

Employee Name & Signature

HSEQ Department

- CATEGORY 1 : A person who has all test results as Normal & Fit. FULL ABILITY.
- CATEGORY 2 : A person who has some problems but need only Diet & Exercise. i.e. No medicine needed for treatment.
- CATEGORY 3 : A person who has problems that needs regular treatment with medicine. Ability to work with Restrictions as per medical report.
- CATEGORY 4 : A person who has the test results as abnormal and Unfit for work.

19.11.2003