MEDICAL FITNESS STATEMENT
FOR ENROLLMENT IN BASIC COURSE, SENIOR ROTC
For use of this form, see AR 145-1; the proponent agency is ODSCRER

I have examined ___________ JOHN J. DOE ___________ and find no medical
(First Name - Middle Initial - Last Name)
condition or physical impairment that precludes his participation in the basic course, Army ROTC, a
program not more physically strenuous than a normal college physical education program.

SIGNATURE OF PHYSICIAN

DATE
4 Jan 11

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