

<p align="center">MEDICAL FITNESS STATEMENT FOR ENROLLMENT IN BASIC COURSE, SENIOR ROTC</p> <p align="center"><small>For use of this form, see AR 145-1; the proponent agency is DCS, G-1.</small></p>	<p>DATE (YYYYMMDD)</p>
<p>I have examined _____ and find no medical <i>(First Name - Middle Initial - Last Name)</i> condition or physical impairment that precludes their participation in the basic course, Army ROTC, a program not more physically strenuous than a normal college physical education program.</p>	
<p>SIGNATURE OF PHYSICIAN</p>	

DA FORM 3425, APR 2023

PREVIOUS EDITIONS ARE OBSOLETE.

APD AEM 1.00ES

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