

# 外国人体格检查记录

## PHYSICAL EXAMINATION RECORD FOR FOREIGNER

### 验证证明

#### CERTIFICATE OF VERIFICATION

|                 |                 |
|-----------------|-----------------|
| 姓 名             | 性 别             |
| Name            | Sex             |
| 国 籍             | 出生日期            |
| Nationality     | Date of birth   |
| 发证日期            | 护照号码            |
| Issued date     | Passport number |
| 现在通讯地址          |                 |
| Present address |                 |

兹证明上列人员所持外国人体格检查记录，

This is to certify that the bearer physical examination record 经过验证，符合  
合要求。

for foreigner, accord with requirement.

医 师 签 字

验证单位盖章

Signature of physician.....Official stamp

日 期

Date.....