



ENGINEERING RESEARCH AND DEVELOPMENT FOR  
TECHNOLOGY (ERDT) SCHOLARSHIP PROGRAM

MEDICAL CERTIFICATE

\_\_\_\_\_  
Date

TO WHOM IT MAY CONCERN:

This is to certify that I have examined \_\_\_\_\_ and found  
(Name of Applicant)  
him/her to be physically and mentally fit to undergo graduate studies.

This certification is issued in connection with his/her application for scholarship under  
P D V W H U T V G R F W R U D O S U R J U D P R I W K H ( Q J L Q H H U L Q J 5 H V H D U  
(ERDT).

\_\_\_\_\_  
Health Agency

\_\_\_\_\_  
Name (Print) and Signature of Licensed  
Physician

\_\_\_\_\_  
Address

\_\_\_\_\_  
PRC License No.