

5311.A.4

Physical Examination of Employee of a Child Care Center

Name of Employee: _____

Name of Center: _____

To the Physician:

This examination is needed to determine the physical ability of this person to care for children as a worker in a child care center, i.e. work may entail bending, lifting, standing for long periods of time, etc.

Date and Result of Physical Exam:

This patient was examined by me and appears to be in good health and physically able to care for children in a child care center.

Physician's Signature: _____

Date: _____

Physician's Phone Number: _____

Address: _____

* Exam required at the time of employment and every three years.