



**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 master's/doctoral program of the Engineering Research and Development for Technology (ERDT).

_____ Health Agency

_____ Name (Print) and Signature of Licensed
Physician

_____ Address

_____ PRC License No.