

**Moorpark College**  
**International Student Office**  
**Health Certificate**

To the student:

Do you have any health problem, physical disability, hearing impairment, visual limitation, or any other physical or mental handicap which would prevent you from carrying a full program of studies, including physical education, in Moorpark College?

Yes \_\_\_\_\_ No \_\_\_\_\_

If you answered "yes" to the above, you will be required to have a licensed physician forward a complete physical examination report to Moorpark College, 7075 Campus Road, Moorpark, CA 93021.

\_\_\_\_\_

**Please have the statement below completed and certified by a licensed physician, professional nurse, or health agency representative:**

"The applicant, \_\_\_\_\_, was checked  
(name)  
through Tuberculin Skin test (Mantoux) on \_\_\_\_\_ and presented  
(date)  
no evidence of communicable tuberculosis." If Tuberculin Skin test positive, results of follow-up Chest x-ray

\_\_\_\_\_  
Signature \_\_\_\_\_  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant statement: I certify that the above information is true and correct to the best of my knowledge:

\_\_\_\_\_  
Signature of Applicant