

## PRE-ADMISSION MEDICAL DECLARATION FORM (Higher Nitec in Opticianry)

TO BE COMPLETED BY APPLICANT	ented to your medical history being released to I	TE)
Full Name :	NRIC/Passport No :	TE)
Contact No :		
Tel: HP:		
Contact Address :		
PERSONAL MEDICAL RECORD:	•	
Answer ' <b>Y</b> ' for 'Yes' and ' <b>N</b> ' for 'No' in the	e boxes. Please leave blank any fields that you a	are unsure of and seek advice
Frequent headaches	G6PD Deficiency (in blood)	Previously smoking/vaping
Dizziness or Fainting	Anaemia (low red blood cells)	Currently smoking/vaping
Fits / Epilepsy	Bruising easily	(sticks per day: )
	Anxiety	
Blindness in one eye (R / L)	Stress disorder / nervous breakdown	T-W
Colour Blindness	Previous counselling or visits to a	Tattoo on body
Other Eye Problems, if any	Psychiatrist for: family/social issues,	Location:
Hearing difficulties	depression, mood disorders or other	
Frequent sneezing /running nose	mental health conditions	Allergies:
Asthma	Have you ever been referred to a school	Liquid detergent / soap
Lung infections	counsellor or to a (MOE) psychologist	Metal (e.g. Nickel / copper)
(eg. TB or pneumonia)	during pri/sec school for special needs	Others:
Hepatitis A	assessment eg. Dyslexia/ADHD/ASD	
Hepatitis B or C or a carrier	or any learning difficulties?	
HIV carrier / AIDS	Was granted extra time in exams	
Gastritis (Gastric problems)	Previous surgical operations	
Diabetes Mellitus	Previous admissions into hospital	For Females Only:
High Blood Pressure	Unsteady hands or Sweaty palms	Currently Pregnant
Kidney / Bladder Disease	Speech problems	EDD:
Bone problems	Currently on any medication	
(eg. Fractures/deformity/weakness)	please specify:	
Frequent Backache		
Rashes (recurrent)		
Other skin conditions, if any		
Please specify if you answer 'YES' to any	y of the above:	
deliberately omitted any relevant fact(	on provided is true and accurate to the best of s). Should I be admitted to ITE on the basis on accurate, I understand that I will render myst course.	of the information given in this report
Date		Signature of Student