



Human Resource Services: Certificated

P.O. Box 246870 • Sacramento, CA 95824-6870

Attention: Credential Technician

**Certificate of Medical Examination of Applicants for
First Employment in a California School District
 or County Superintendent of Schools Office**

Name: Last			First	Middle	Social Security Number
Address: Street			City		Zip Code

To the Physician

Education Code Section 44839 and Title V, Section 5504, require a person employed in a certificated position for the first time in a California School District or County Superintendent of Schools Office to have a medical examination to determine freedom from any disabling disease unfitting the person to instruct or associate with children. This examination should be based on the physical requirements of the position to be filled by the applicant. A brief description of such requirements is listed on the reverse side of this form.

Education Code also provides that:

- The medical examination shall have been conducted not more than six months before the submission of the certificate.
- The medical certificate shall be submitted directly to the governing board or County Superintendent by a physician and surgeon licensed under the Business and Professions Code, a commissioned medical officer exempted from licensure by Section 2144 of the Business and Professions Code, or a commissioned medical officer in the US Air Force.
- The medical certification shall become a part of the personnel record of the employee and shall be open to the employee or his designee.

Disabling disease should be considered in terms of: (1) Evidence of lack of ability to demonstrate average physical and emotional capacity for the functions involved. (2) Evidence of disability which periodically may disable the individual; for example, rheumatoid arthritis, uncontrolled diabetes, asthma. (3) Evidence of long-term disability which may progressively deteriorate; for example, malignancy, multiple sclerosis.

Check Every Item	Yes	No	Details (Relate to functions to be performed)
1. Is there evidence of disabling disease of the musculo-skeletal, cardio-vascular, nervous, gastro-intestinal, genito-urinary or endocrine systems?			
2. Is there evidence of disabling disease affecting vision, hearing or speech?			
3. Is there evidence of disabling metabolic disease?			
4. Is there evidence of infectious disease in a communicable stage?			
5. Is there evidence of drug dependency including alcoholism?			
6. Is there evidence of any other disabling disease?			

To be returned by the examining physician directly to the Sacramento City Unified School District, Human Resource Services, P.O. Box 246870, Sacramento, CA 95824-6870 on or before _____.

(over)

