

DEPARTMENT OF PSYCHOLOGY AND PSYCHOSES

MEDICAL EXEMPTION CERTIFICATE

THIS CERTIFICATE GRANTS THE BEARER THE RIGHT TO FORGO ANY AND ALL FORMS OF NORMAL PSYCHOLOGICAL EVALUATION AS RUN BY THE DEPARTMENT OF PSYCHOLOGY AND PSYCHOSES AS IT HAS BEEN DEEMED UNNECESSARY FOR SUCH TESTING TO BE CARRIED OUT ON THE HOLDER OF THIS CERTIFICATE.

NAME OF HOLDER _____

SIGNATURE _____

AUTHORIZED BY _____

SIGNATURE _____

DATE OF ISSUE _____

EXPIRY DATE _____

(If applicable)

DEPARTMENTAL
AUTHORISATION

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