YWAM COOK ISLANDS **Medical Report**

We would appreciate you filling out this form to assist us in assessing the above named applicant suitability. This is a short term missionary service in which there will be some physical exertion over a period of 24 weeks of training and study in a group situation with possible overseas travel. This form will be kept confidential. Serious consideration will be given to your comments; therefore we ask that you complete this form carefully. Thank you for your assistance. Please indicate the following, and comment where necessary:

Name of Applicant: _____

1. Weight kg (st lbs) Height cm (ft ins)
2. Is the applicant under medical supervision at this time or taking any medication?
   _____
   If so, what kind? _____
3. Would you consider the applicant in good physical health? ☐Yes ☐No
4. Is the applicant's chest, heart and blood pressure normal? ☐Yes ☐No
5. Is the applicant's sight, hearing and speech normal? ☐Yes ☐No
6. Has the applicant adequate emotional and mental stability to undertake such service and training?
   ☐Yes ☐No
7. Please list any significant medical and/or psychiatric history:
   _____
8. Please add any additional comments regarding the applicant's health or special limitations affecting physical, mental or emotional capabilities
   _____
   _____
   _____

Doctors Sign: _____Date: 09-Mar-17

_____
Doctors Name Street Country, Zip Code, City

Please mail this confidential form to:

Youth With A Mission
Discipleship Training School
P.O.Box 436
Rarotonga, Cook Islands

E-mail: dts@ywamcooks.org