

Walker

Medical Instructional Services, Inc.
1035 4 Mile Rd NW Grand Rapids, MI 49544
616-784-3001 P 616-784-2955 F

Student Name _____

Student Medical Release Form

Medical Staff: Due to the physical nature of the program(s) and the responsibility for caring for **legally classified vulnerable adults in a clinical setting**, students are expected to meet the minimal health criteria in order to attend the program. Students must be able to fully physically participate in the program without any medical restriction. To prevent this form from being altered it needs to be faxed directly from the medical office to Walker Medical Instructional Services, Inc. at 616-784-2955.

Students must at a minimum be able to:

- Be able to lift a minimum of 50 pounds to a height of 3 feet (approximately the height of a desk/table) 5 or more times per day. **Initial** _____
- Be able to push, pull or carry a minimum of 50 pounds for 10 – 15 feet, 5 or more times per day. **Initial** _____
- Be able to bend at the waist to reach the floor repeatedly. **Initial** _____
- Be able to repeatedly stoop, kneel, crouch and crawl. **Initial** _____
- Your visual and hearing capacities must be functioning at a level sufficient enough to provide for the supervisory and physical care needs of residents/clients. **Initial** _____
- Be able to stand and walk without rest for more than 4 hours per day. **Initial** _____
- Be free of communicable and mental illnesses. **Initial** _____

Additional Doctor notes: _____

Date

Doctor or designee signature & title

Initial

Practice Name, contact person, phone, Fax, address, etc.

