This form is required and must be completed by the doctor/clinician and the student. Scan the completed form and upload to MyUHS, a secure student health portal. ([www.princeton.edu/myuhs](http://www.princeton.edu/myuhs))

**Physical Exam (A doctor’s or clinician’s signature is required)**

A physical exam within the past year is required for all incoming undergraduate students. A clinician must complete this section. Please check one:

- Physical exam performed; no medical concerns. The student can participate in recreational, intramural and intercollegiate sports (including contact sports).
- Physical exam performed; medical concerns identified. (Letter of explanation/description required and attached.)

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**Clinician Signature**

[Signature]

Date

**Student Signature (Required)**

I am aware of the information provided by my doctor/clinician completing this form regarding medical concerns and participation in sports.

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**Student Signature**

[Signature]

Date

Upload this completed page to [www.princeton.edu/MyUHS](http://www.princeton.edu/MyUHS).