

MEDICAL CERTIFICATE

[Annex to the law of 15/12/1980 on entry to the territory, stay, settlement and removal of foreigners]

I, the undersigned medical doctor (name and surname), certify that I have examined today:

Mr./Mrs./Ms. (name and surname)

Nationality

Date and place of birth

Residence

and have found that he/she is not suffering from any of the following diseases that may endanger public health:

- 1) quarantine diseases as referred to in the International Health Regulations of the World Health Organization, signed in Geneva on May 23, 2005;
- 2) tuberculosis of the respiratory system that is active or has a progressive tendency;
- 3) other infectious or contagious parasitic diseases, provided that they are the subject, in Belgium, of protective measures for Belgian nationals.

Issued at on

Doctor's signature

Stamp of doctor

If applicable, stamp of the Belgian diplomatic or consular post (Seal)

at, on