

McLaren Print System Order

Order No: 9539 Reprint Previous Order No: 5760
Order Date: 2015-03-03
User: Billie Peters
Phone: 810-667-7025

Ship Location: McLaren Occupational and Convenient Care
1254 N Main St
Lapeer MI 48446,

Forms

Quantity: 100
Paragon Dept No: 65100
Dept Name: Lapeer Occupational
Company Number: 810

Order Total Price: 0.00

Item Number: MM-34603
Item Description: Pre-Employment Physical Exam Clearance Form (Occupational Health)
Revision Date: 8/2013
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish:
Drill: None
Misc Info:

McLaren Medical Group



PRE-EMPLOYMENT PHYSICAL EXAM - CLEARANCE FORM

Name _____ Date of Birth: _____

Accepted Declined

Accepted with recommended accommodations: _____

Further testing required to evaluate ability or risk: _____

Medical Hold - (waiting for additional data): _____

Additional Comments: _____

Name of examining provider (print) _____ Date/Time of Exam _____

Address _____ Telephone _____

Signature of examining provider _____

PRE-EMPLOYMENT PHYSICAL EXAM - CLEARANCE FORM