

MEDICAL FORM Department of Economics University of Michigan Revised: June 1, 2017

To the health professional managing my care:

I am concerned that my present medical condition might impair significantly my ability to perform normally on a graded assignment. Please complete this form before the end of this visit. If this visit is taking place at the University Health Service, please complete also the UHS Visit/Verification Medical Statement.

To be completed in advance by the student:

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Official stamp of the health care organization: