

To: Personnel / HR Manager  
Line Manager & Employee  
Sample Body Shop Ltd

Employee Name **G. Botham**

- 1. Fit for Normal Duties
- 2. Fit for Night Shift Work
- 3. Unfit for Night Shift Work
- 4. Unfit for All Duties
- 5. Restrictions, as listed below

Latex allergy suspected. Use vinyl gloves



6. Adjustments required under Disability Discrimination Act

[Empty box for adjustments]

The restrictions are:  
Indefinite / due for review on \_\_\_\_\_

*Clarke*

Date of Tests **12feb08**

\_\_\_\_\_  
Occupational Health Specialist