To be filled in by your doctor or optician. (Prescription not accepted) Applicant's full name	
Vision – To be recorded in metric Snellen acuity:	
	e:6 /
b. Corrected (wearing corrective lenses if necessary) Right eye: 6 / Left eye	e: 6 /
c. Vision with both eyes open, the minimum corrected visual acuity must be 6/6 (wearing corrective lenses if necessary). See Ch.6 App.2 6.7(a)	
d. Are corrective lenses (glasses or contact lenses) required for driving?	ES NO
e. Is there evidence of visual field loss on confrontation testing? If 'Yes', give details below.	ES NO
*Is there abnormality of colour vision on testing (Ishihara or equivalent)? If 'Ves' give details below See Ch 6 Ann 2 6 7/f)	ES NO
Please use this space to give further details Name of optician/doctor	
Signature of optician/doctor	
Date / /	
SECTION 4B DOCTOR'S MEDICAL REPORT (For Race, Truck, Long Circuit Karting & ALL International Licences only. Refer to Section 4	4 for guidance)
1. Doctor's name Please read Chapter 6, Appendix 2 of the	
1a. Doctor's practice stamp/contact details including GMC registration no. National Competition Rules, available in the Resource www.motorsportuk.org before filling in this section for ensuring that ALL questions have been answered. Not questions will require further information to be submit	or your patient, te that unanswered iitted by you.
1b. Applicant's full name	
Date of Birth / Heart Rat	te
Height cm Weight kg Blood pressure	/
2. Are you the applicant's registered General Practitioner? YES NO If no, in what capacity are you providing this report?	
 Is the 12 lead resting ECG normal? See section 4 above for guidance. Required for National applicants aged 60 and over OR International applicants aged 49 and under. Applicants aged 50 or OVER who are applying for an International Licence must enclose a stress-related ECG report signed by a Consultant Cardiologist (see Ch.6 App.2 8.1) or an accepted equivalent advised by a Cardiologist 	YES NO
3a. When was the 12 lead resting ECG performed? (See section 4 for validity period)	/
The 'normal' answer to each question below is 'NO'. In respect of each 'YES' response, further details should be provided in the doctor's comments sec	ction.
4. Is there any evidence of abnormality of the heart or cardiovascular system? If 'Yes', give details below.	5 NO
5. Is there any evidence of any mental health condition in the applicant's medical history? If 'Yes', give details below.	5 NO
 Is there any evidence of any mental health condition in the applicant's medical history? If 'Yes', give details below. Has the applicant suffered from epilepsy, seizures or any other neurological conditions? If 'Yes', give details below. YES	5 NO
 Is there any evidence of any mental health condition in the applicant's medical history? If 'Yes', give details below. Has the applicant suffered from epilepsy, seizures or any other neurological conditions? If 'Yes', give details below. Is there any abnormality of tone, reflexes and ROM of any limb? If 'Yes', give details below. YES	5 NO 5 NO
5. Is there any evidence of any mental health condition in the applicant's medical history? If 'Yes', give details below. 4. Has the applicant suffered from epilepsy, seizures or any other neurological conditions? If 'Yes', give details below. 4. YES	5 NO 5 NO 5 NO 5 NO
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5. Is there any evidence of any mental health condition in the applicant's medical history? If 'Yes', give details below. 6. Has the applicant suffered from epilepsy, seizures or any other neurological conditions? If 'Yes', give details below. 7. Is there any abnormality of tone, reflexes and ROM of any limb? If 'Yes', give details below. 8. Was there evidence of haematuria, proteinuria or glycosuria on urinalysis? If 'Yes', give details below. 9. Is there any reason why the applicant should not participate in motorsport? If 'Yes', please give details below. YES If you have ticked 'YES' to any of the questions above, or if you are unsure of the applicant's fitness to participate in motorsport activities and wish to reflect the supplicant in motorsport activities and wish to reflect the supplicant's fitness to participate in motorsport activities and wish to reflect the supplicant's fitness to participate in motorsport activities and wish to reflect the supplicant in motorsport activities and wish to reflect the supplicant in motorsport activities and wish to reflect the supplicant in motorsport activities and wish to reflect the supplicant in motorsport activities and wish to reflect the supplicant in motorsport activities and wish to reflect the supplicant in motorsport activities and wish to reflect the supplicant in the supplicant	5 NO 5 NO 5 NO 5 NO 5 NO 5 NO
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