



4450 Tidewater Ave., Oakland, CA 94601 510.615.5872

<h2 style="margin: 0;">Clearance for Deployment Form</h2> <p style="margin: 0;">California Task Force 4 – 35 Hegenberger Place, Oakland, CA 94621 510-615-5872 Office      510-569-2217 Fax</p>
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Today's Date		Exam Date	
Person Examined (Please Print)			
Physician or Licensed Health Care Provider (Please Print)			

The above-referenced task force member has undergone a health screening evaluation.

**The result of this assessment:**

- Provisional clearance for deployment.
- Provisional clearance for deployment: Further review by physician is indicated.
- Further review by physician is indicated. Deployment is temporarily deferred.



**Final Physician clearance for deployment:**

\_\_\_\_\_ Physician Signature

\_\_\_\_\_ Date

**The employee has been provided a copy of this document**