

Medical examination: statement of parties and examiner

To be completed by the relevant party/examiner	
Name of court	Case No.
Name of Petitioner	
Name of Respondent	

(please tick the boxes that apply)

I,

of
Postcode

declare that I am the person referred to as the ☐ Petitioner ☐ Respondent

in the order dated //

appointing (name of
medical examiner)

to examine me in accordance with the directions set out in the order.

Dated //

Signed

I,

of
Postcode

the medical examiner named in the order, certify that the above statement was signed in my presence by the person I have examined in accordance with the directions set out in the order.

Dated //

Signed

To the District Judge