

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- The results of the following pre-employment medical/physical/**psychological** must be attached to this form:

- ☒ Blood Test
- ☒ Urinalysis
- ☒ Chest X-Ray
- ☒ Drug Test
- ☒ Psychological Test
- ☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS
CABRAS, MARCO LOPEZ			ICTMC-USU
ADDRESS			
Brgy. Guadalupe Baybay City			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
39.	MALE	MARRIED	Permanent

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found <u>him</u> /her to be physically and medically <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
MERRY CHRIST'L T. SUPNET-GUINOSOR, M.D. Medical Officer III License No. 111828			
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
111828	1.67m	73 KGS	
OFFICIAL DESIGNATION	DATE EXAMINED		
MEDICAL OFFICER III	10/28/2024		

(Neuro Psychiatric Test)
Ormoc City (053-832-3123)

Date: 10/26/2024

PURPOSE OF EXAMINATION: EMPLOYMENT
NAME: CABRAS, MARCO LOPEZ Age: 39 SEX: M C.S: MARRIED
HOME ADDRESS: BAYBAY CITY, LEYTE
EDUCATIONAL ATTAINMENT: COLLEGE GRADUATE
PURPOSE/ DATE OF PREVIOUS NP EXAMINATION _____

FACTORS	ABSENT	LOW	AVERAGE	HIGH
INTELLIGENCE				
1. Capacity for Abstraction			x	
2. Organizational Capacity			x	
3. Learning Activities			x	
4. Alertness			x	
MANNER OF COMMUNICATION PREFERRED				
1. Verbal			x	
2. Non-Verbal			x	
EMOTIONAL STABILITY				
1. Coping with Stress			x	
2. Control of Aggressive hostile impulse			x	
3. Free from neuro tendencies			x	
VALUES				
1. Positive			x	
2. Negative			x	
EDUCATION: Relevant Training			x	
EXPERIENCE: Security Training				
Handling Guns				
Others:				
MOTIVATION: Security Reasons			x	
Self-esteem / confidence				
Others:				
SOCIAL ADAPTABILITY:				
1. With people in general			x	
2. With peers			x	
3. With supervisor			x	
4. With subordinates			x	
WORK ATTITUDES:				
1. Responsibility			x	
2. Loyalty			x	
3. Perseverance				x
4. Initiative				x

REMARKS

Psychological: No gross psychological abnormality
Negative psychiatric disorder.

RECOMMENDATION

FOR FIREARMS LICENCE

____ Recommended for possession
____ Recommended permit to carry
____ Needs training on handling to carry
____ Not recommended

FOR SECURITY GUARDS/OTHERS

☒ Recommended with
____ Recommended risk
____ Needs training
____ Not recommended

LYN L. VERONA, MD
Psychiatrist / NP Screener
Accreditation / PRC No. 80515