MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
- b. Attach this certificate to original appointment, transfer and reemployment.
- c. 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

52	FEMALE	MARRIED	PROF 111	
\GE	SEX	CIVIL STATUS	PROPOSED POSITION	
STA. CAMZ, BAYBAY CITY			Baybay Gity	
ADDRESS	TILO MININI	-UN /N.	DOH, VSU, Visca,	
DEN	ITEZ MARIL	Della carrie de		
NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS	

FOR THE LICENSED GOVERNMENT PHYSICIAN

	12 CAOW 2022		
OFFICIAL DESIGNATION	DATE EXAMINED		
	101 m	80-4 kgs	'B'
	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
AGENCY/Affiliation of Licensed Government Physician:	LIE COLT	WEIGHT	DI COD
Christelle Verius F. Capuno, M.D. Lic. No. 0156881	PRO	POSED APPOIN	TEE
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE		
I hereby certify that I have reviewed and evaluated the attached exa above named individual and found him/her to be physically and medically	FIT / UNFIT fo	s, personally e. or employment.	xamined the