CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

NAME / Last First Mi	ddle or if married woman Maide	an Nama)	AGE	NCY ADD	RESS
NAME (Last, First, Middle, or if married woman, Maiden Name) JANSALIN , JACOB GUENN F.			AGENCY ADDRESS		
ADDRESS	10000 GWN				
100	ca , Baybay				
AGE	SEX MALE	CIVIL	PROPOSED POSITION		
51 MALE		STATUS	ASSOC PROFIU		
	Pre-Employme	nt Medical-Physica			
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