

MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

1. This medical certificate should be accomplished by a government physician.
2. Attached this certificate to original appointments and reinstatements.

NAME (Last, First, Middle, or if married woman, Maiden Name) TRUYA RIZALINA DEMOL			AGENCY ADDRESS		
ADDRESS J.P. LAUREL ST ZONE 5 BAYBAY LEYTE					
AGE 53	SEX F	CIVIL STATUS M	PROPOSED POSITION		
Pre-Employment Medical-Physical Tests					
<ol style="list-style-type: none"> 1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If necessary) 					
FOR THE PHYSICIAN					
I HEREBY CERTIFY that I have personally examined the above-named individual and found <u>her/him</u> to be physically and medically fit/unfit for employment					Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN JOSEPHINE U. ZAFICHO MEDICAL OFFICER		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
OFFICIAL DESIGNATION LIC # 075511		HEIGHT (Barefoot) 155.5cm	WEIGHT (Stripped) 70.5kg	BLOOD TYPE B	
AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines			DATE EXAMINED 9/5/14		

139
/80