S Form	No.	211
evised 20	18	

MEDICAL CERTIFICATE (For Employment)

INS	IR	O C	1 1	ON	S

- 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

Beato,	Ma Rosa De	Lina Gerebise	Department of Animal Science
ADDRESS			Suence
B154- Gu	adalupe, Bayb.	y City, Leyte	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
34	Female	Married	Assistant Professor 4

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exa above named individual and found him/her to be physically and medically 21	
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE
AMPRIL ALIDAGE STATES STATES	DRODOSED ADDOINTEE

PROPOSED APPOINTEE

AGENCY/Affiliation	of Licensed	Government Physicia	ar
	1100	Haspilal	

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)

n:

	VSU	Hospital
LICENSE NO.		

111828

HEIGHT (M) Bare Foot 152 cm

47 44

WEIGHT (KG)

Stripped

AGENCY / ADDRESS

TYPE

BLOOD

DATE EXAMINED

5/2/2024

OFFICIAL DESIGNATION Medical Officer III