CS Form No. 211 Revised 2018

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

BARRERA, JOMARI JOSEPH ALTIVO

POBLACION ZONE 23, BAYBAY CITY, LEYTE

☐ Psychological Test

☐ Neuro-Psychiatric Examination (if applicable)

CIVIL STATUS

FOR THE PROPOSED APPOINTEE NAME (Last Name, First Name, Name Extension (if any) and Middle Name)

31 MALE SINGLE ASSISTANT PROFESSOR I 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 him/her to be physically and medically AFIT / DUNFIT for employment. SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: OTHER INFORMATION ABOUT THE

ELWIN JAY V. YU, MD, MPH. Chief of Hospital I License Ne. 098800

PROPOSED APPOINTEE

AGENCY / ADDRESS

PROPOSED POSITION

HEIGHT (M) WEIGHT (KG) BLOOD

AGENCY/Affiliation of Licensed Government Physician:

SEX

Bare Foot (40

Stripped 100

DATE EXAMINED

OFFICIAL DESIGNATION

LICENSE NO.

AGE