## 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/mental examinations must be attached to this form:

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☐ Blood Test
☐ Urinalysis
☐ Chest X-Ray
☐ Drug Test
☐ Psychological Test
☐ Neuro-Psychiatric Examination (if applicable)

## FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)		ension (if any) and Middle Name)	AGENCY / ADDRESS		
ESTILLORE, CHELYN GALUPO		GALLIPO	VSU. Visca, Baybay City, Levte		
GABAS ,	BAYBAY CITY	LEVIE	- 72		
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
34	F	MARRIED	INSTRUCTOR 1		

## FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN	OTHER IN	EODMATION A	DOLLT THE	$\dashv$
OSEPHINE O ZAFICO, M.D.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
AGENCY/Affiliation of Licensed Government Physician	-			
VM HOSPINAL				
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD	n
075699	lez	754	AO+	100
OFFICIAL DESIGNATION	DATE EXAMINED			
med. onia in	2 23 [18			