

(Neuro Psychiatric Test) Ormoc City (053-832-3123)

Date: 9/15/2023

| AME: CAPUND, CHARMAGNE FAITH F. | | Age:30 | C.S:_ | SINGLE |
|---|--|--|---------|--------|
| OME ADDRESS: BAYBAY CITY | NT 1 (T) T) | | | |
| UCATIONAL ATTAINMENT: COLLEGE GRAD | | | | |
| JRPOSE/ DATE OF PREVIOUS NP EXAMINATION | UN | | | |
| | | | | |
| ACTORS | ABSENT | LOW | AVERAGE | HIGH |
| NTELLIGENCE | | | | |
| . Capacity for Abstraction | | | × | |
| . Organizational Capacity | - | | × | |
| Learning Activities | | | × | |
| . Alertness | | | * | |
| MANNER OF COMMUNICATION PREFERRED | | | | |
| . Verbal | | | × | |
| 2. Non-Verbal | | | × | |
| EMOTIONAL STABILITY | | | | 1 |
| . Coping with Stress | | | × | |
| Control of Aggressive hostile impulse | | | × | |
| Free from neuro tendencies | | | × | |
| /ALUES | | | | |
| . Positive | | | * | |
| 2. Negative | | | * | |
| Negative | | | | |
| DUCATION: Relevant Training | | | | |
| XPERIENCE: Security Training | | | × | |
| Handling Guns | | | | |
| Others: | | | | |
| NOTIVATION: Security Reasons | | | | |
| Self-esteem / confidence | | | × | |
| Others: | atheli sulti viste e nund procesti una et o elocita el perocolo. | MODELLA CONTRACTOR CON | | |
| 0410137 | and the state of t | | | |
| OCIAL ADAPTABILITY: | | | | |
| . With people in general | | | × | |
| . With peers | | | X | |
| . With supervisor | | | X | |
| . With subordinates | | | X | |
| ORK ATTITUDES: | | | | - |
| . Responsibility | | - | × | |
| . Loyalty | *************************************** | | × | |
| . Perseverance | | | × | |
| . Initiative | | | X | |
| EMARKS | | | | |

RECOMMENDATION

Neuro Psychiatric Negative psychiatric disorder.

| 1 / pm 00 00 | MMLINDALION | |
|---|-------------------------------------|--|
| F | OR FIREARMS LICENCE | |
| MINISTRA VALUE OF THE PARTY NAMED IN COLUMN | Recommended for possession | |
| | Recommended permit to carry | |
| | Needs training on handling to carry | |
| | Not recommended | |
| | | |

| FOR S | ECURITY GUARDS/OTHERS |
|-------|------------------------------|
| X | Recommended with |
| | Recommended risk |
| | Needs training |
| | Not recommended n |

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Psychiatrist / NP Screener
Accreditation / PRC No. 80515