MEDICAL CERTIFICATE

(For Employment)

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- 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)

Medical Officer 111

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

AGENCY / ADDRESS

July 16,2024

ADDRESS	BELLO, LORIE				
ADDRESS	NAHULID, LIBAGON	I, SOUTHERN LEYTE	VISAYAS STATE UNIVERSITY / BAYBAY CITY, LEYTE		
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
30	FEMALE	SINGLE	INSTRUCTOR I		
	FOR THE	LICENSED GOVERN	MENT PHYSICIAN		

30	30 FEMALE SINGLE				INSTRUCTOR I				
	FOR 1	HE L	ICENSED	GOVERNME	NT PHYSIC	CIAN			
				ited the attached e.					
SIGNATURE over PR	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE								
AGENCY/Affiliation of		elle Verlus F. Car Lic. No. 01568 overnment	no Sporing						
	N & U	Hopm	ta)						
LICENSE NO.		**********			HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD		
		0/20	1881		1.47cm	The second secon	1974 A A 1974 (197		
OFFICIAL DESIGNA		DATE EXAMINE	D						



OPTIMIST NEURO PSYCHOLOGICAL TESTING CENTER

103 Medina Bldg. 2^{nd} floor. Bony Serrano Rd. Brgy. Bagong Lipunan ng Crame Quezon City PNP Accreditation No. NCR 2002 - 0073

NEURO - PSYCHIATRIC EVALUATION REPORT

IP Clearance Form:	Date:7/13/2024				
lame: LORIE MAE BELLO	Age: 30 Civil Status: S				
Address: NAHULID, LIBAGON, SOL					
Occupation: CIVIL ENGINEER	Position: INSTRUCTOR I				
Educational Attainment: MAS	Religion: CHRISTIAN				
Company / Requesting Agency:	VSU				
INI	DIVIDU	AL PS	YCI	HOLOG	ICAL PROFILE
FACTORS CONSIDERED	RELATED FACTORS:				
z. General Mental Ability			×		Years of Experience in:
. Ability to Understand and					a. Security Work
Follow Instructions				X	b. Handling Guns
. Communication Skills			×		X c. Others(Specify):
d. Self-Esteem			X		
2. Frustration Tolerance			×		LIMITATIONS:
f. Impulse Control				X	For possession only
g. Interpersonal Relations			X		Needs training in handling guns
n. Flexibility				X	Needs Security Guards
. Integrity			X		No Fireamrs allowed
. Perseverance				X	X Others (Specify)
EGEND: 1-Poor 2-Fair 3-Average	4-Abo	ve Ave.	5-Ex	ellent	
interests. A po hardships and Determined to	tential le trials. Hu work an	ader an mble in d shows	d initi	iator. Shov lealings an	ner as she expands ers sphere of - vs long patience and she is able to endure d can ensure good relationship. n.
Psychiatric: No psychiatric ide No psychologic			at th	e time of	exam
Recommendation:					Purpose:
X_ Granted	Firearms License/PTCFOR Security Guard License/SO License X Others (Specify):				
					REQUIREMENT
No.					DR. CLETO P. MANONGAS
PSI Chalogist					NP Screener/ Psychiatrist
Psylchologist PNP Accreditation No. NP – 065					PNP Accreditation No. ND - 12
VALIDATED BY:					ODHS
					OPCN
NOTE: *This is valid for for six(6) m	onths fro	m the da	ate iss	sued. IF VA	LIDATED valid for one(1) year.