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 ☐ Psychological Test ☐ Neuro-Psychiatric Examination (if applicable) FOR THE PROPOSED APPOINTEE NAME (Last Name, First Name, Name Extension (if any) and Middle Name) AGENCY / ADDRESS COUS, HONEY SOFIA **ADDRESS** AGE CIVIL STATUS PROPOSED POSITION FOR 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 / UNFIT for employment. SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:

Elwin Jay V. Yu, M.D. OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE Chief of Hospital License No. 098800 AGENCY/Affiliation of Licensed Government Physician: LICENSE NO. BLOOD HEIGHT (M) WEIGHT (KG) Bare Foot Stripped OFFICIAL DESIGNATION DATE EXAMINED