MEDICAL CERTIFICATE

(For Employment)

		INSTRUCTIONS			
	b. Attach this certificat c. The results of the formust be attached to the Blood Test Urinalysis Chest X-Ri Drug Test Psychologi	ay	eemployment.		
	FOF	R THE PROPOSED APPO	DINTEE		
NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS		
CABEUN, ROLANDO JR SARASOLA			VSU-	15 AY ILAY	CAMPUS
ADDRESS WAJUULU	APARTMENT	VSU- BAYISAY COM			
GE SEX CIVIL STATUS			PROPOSED POSITION		
25	M	M	Institu	ctm (
I hereby or		ICENSED GOVERNMEN			
above named ind	lividual and found him/	wed and evaluated the attached exe her to be physically and medically 🏾	amination result FIT / □UNFIT I	s, personally for employmer	examined the nt.
SIGNATURE over F	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE				
AGENCY/Affiliation	LICENSE NO. (-		
	U	STER USU			
LICENSE NO.	Otto	E&M	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE B+1
OFFICIAL DESIGN		lical officer 111	DATE EXAMINED		3