

### INSTRUCTIONS

1. This medical certificate should be accomplished by a government physician.
2. Attached this certificate to original appointments and reinstatements.

NAME ( Last, First, Middle, or if married woman, Maiden Name) <b>TAN JULIE DIAMANTE</b>			AGENCY ADDRESS <b>VSU, BAYBAY, LEYTE</b> <b>6521</b>		
ADDRESS <b>PhilRoutcross, VSU, Baybay, Leyte</b>					
AGE <b>55 yrs.</b>	SEX <b>FEMALE</b>	CIVIL STATUS <b>MARRIED</b>	PROPOSED POSITION <b>PROFESSOR VI</b>		
Pre-Employment Medical-Physical Tests					
<ol style="list-style-type: none"> <li>1. Blood Test</li> <li>2. Urinalysis</li> <li>3. Chest X-ray</li> <li>4. Drug Test</li> <li>5. Neuro-Psychiatric Examination (If necessary)</li> </ol>					
<b>FOR THE PHYSICIAN</b>					
I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be physically and medically fit/unfit for employment					Affix Documentary Stamp
PRINTED NAME / SIGNATURE OF PHYSICIAN <b>JOSEPHINE O. ZAFICOLM D.</b>		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
OFFICIAL DESIGNATION <b>MEDICAL OFFICER III</b> <b>LIC. # 075699</b>			HEIGHT (Barefoot) <b>145L.</b>	WEIGHT (Stripped) <b>57.2kgs.</b>	BLOOD TYPE <b>B</b>
AGENCY: <b>VSU HOSPITAL</b> <b>Visayas State University</b> <b>Visca, Baybay, Leyte, Philippines</b>			DATE EXAMINED <b>Feb 23, 2012</b>		