

## 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) <b>TAN, HAZEL ALENA DIAMANTE</b>			AGENCY / ADDRESS <b>PhilKootCrops - USU</b>
ADDRESS <b>91 KILBOURNE ST., USU, BAYBAY CITY, LUTTE</b>			
AGE <b>32</b>	SEX <b>F</b>	CIVIL STATUS <b>SINGLE</b>	PROPOSED POSITION <b>Instructor 1</b>

## 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 <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  <b>Christelle Venus F. Capino, M.D.</b> Lic. No. 0156881		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician: <b>USU</b>			
LICENSE NO. <b>0156881</b>	HEIGHT (M) Bare Foot <b>143-7</b>	WEIGHT (KG) Stripped <b>66</b>	BLOOD TYPE <b>A+</b>
OFFICIAL DESIGNATION <b>Medical Officer III</b>		DATE EXAMINED <b>10-17-23</b>	

BP  
11/6/20