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/mental examinations
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		
POSAS Edgar Penetrado			visayas STATE Unimers?		
ADDRESS					
SAN AS	gastin Bay!	day city			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
56	MAIC	M	SECURITY GUARD II		

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exalabove named individual and found him/her to be physically and medically Z			AND ADDRESS OF THE PARTY OF THE
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: JOSEPHINE O ZAFICO, M.D.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	163 cm	86.2Kg	0
OFFICIAL DESIGNATION	DATE EXAMINED		
Med oppor on	office on 10/19/18		<