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

e, First Name, Name Exte	AGENCY / ADDRESS		
Softsia 1	DVPRET		
•	V / KCI		
OVPREI/Poingasugan, Roughay City, Leyte			
SEX	CIVIL STATUS	PROPOSED POSITION	
F	M	Adm. Aide II	
	Softsin 1 REI/Pongas	SEX CIVIL STATUS	

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached example above named individual and found him/her to be physically and medically to signature over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	xamination result □FIT / □UNFIT f	s, personally e or employment	examined the
MERRY CHRIST'L T. SUPNET-GUINOCIR, M.D.	PROPOSED APPOINTEE		
Medical Officer III License No. 111828			
AGENCY/Affiliation of Licensed Government Physician:			
Ver tospith			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
M&Z&	Hu a	59	Q
OFFICIAL DESIGNATION	DATE EXAMINED		