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)			AGENCY / ADDRESS
18PA	EL JOEU	W .	* .
ADDRESS	a majo para como degendrado de la como a filamento de como por acomo por como como de		NSCA
HIPMA	JANAN		110011
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
49	M	MARIED	NOMIN ALDE III

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached e above named individual and found him/her to be physically and medically			
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: SARAH AURORA W TABADA, M.D. Medical Officer III	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD h TYPE
	1832	Hez	A1"
OFFICIAL DESIGNATION	DATE EXAMINED 1-27-2022		

18 KI 48