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

53	Male	Married	Professor 11	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
Duplex E-1, Vicca, Baybay City, leyte			3,557.75. 557. 557.	
POLINAR, ANATOLIO N.			Visca, Poagbag City	
NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS	

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the

Mbig	10. 6-21		
OFFICIAL DESIGNATION	DATE EXAMINED		
11112)	1,54	42 Kg	"0"
1/1/4)	Bare Foot	Stripped	TYPE
LICENSE NO.	HEIGHT (M)	WEIGHT (KG)	BLOOD
16W			
AGENCY/Affiliation of Licensed Government Physician:	(16) (16)		
wind courses Til cours			
	PROPOSED APPOINTEE		TEE
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE		
above named individual and found him/her to be physically and medically		or omproyment.	

BP-