

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  |
| Morano, Luz Graiz   |        |              | VSU - NARC        |
| ADDRESS   |        |              |                   |
| Apt. 57, Rue, Visca, Baybay, Lrtc                                     |        |              |                   |
| AGE   | SEX    | CIVIL STATUS | PROPOSED POSITION |
| 63 y.o.   | Female | Married      | Professor IV      |

FOR THE LICENSED GOVERNMENT PHYSICIAN

|   |                         |  |               |
|---|-------------------------|--|---------------|
| <i>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.</i> |                         |  |               |
| SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:   |                         | OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE |               |
|    |                         |  |               |
| AGENCY/Affiliation of Licensed Government Physician:  |                         |  |               |
| LICENSE NO.   | HEIGHT (M)<br>Bare Foot | WEIGHT (KG)<br>Stripped                        | BLOOD<br>TYPE |
|   | 1.48                    | 45.6   |               |
| OFFICIAL DESIGNATION  | DATE EXAMINED           |  |               |
|   | 4-3-21                  |  |               |