## 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	
GNA	RTE, DONNI	7 MASION	DEP.T. OF	BIOLOGICAL
ADDRESS				
GNAC	ALUPE, BAYBA	Y CITY, LEYTE	SCIENCES,	VSV
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
34	FEMALE	MARRIED	ASST.	PROF. IV

## FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examples above named individual and found him/her to be physically and medically	mination result	ts, personally of	examined the t.
AGENCY/Affiliation of Licensed Government Physician:	OTHER IN	FORMATION AI POSED APPOIN	BOUT THE
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	1.21	V.2Z	
OFFICIAL DESIGNATION	DATE EXAMINED		
		8.30.93	