CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

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<ol> <li>This medical certificate should be accomplished by a government physician.</li> <li>Attached this certificate to original appointments and reinstatements.</li> </ol>										
NAME (Last, First, Middle, or if married woman, Maiden	AGENCY ADDRESS									
CAMACHO, CHETRA MAY,	VSU LIBRARY									
ADDRESS	0130									
APT. 90, KLUBOURNE ST. VISCA, BAYBAY CITY										
AGE	CIVIL	PROPOSED POSITION								
3) Femalt	STATUS MARMED	COWEGE UBRARIAN								
Pre-Employment Medical-Physical Tests										
<ul> <li>Blood Test</li> <li>Urinalysis</li> <li>Chest X-ray</li> <li>Drug Test</li> <li>Neuro-Psychiatric Examination (If necessary)</li> </ul>										
FOR THE PHYSICIAN										
I HEREBY CERITIFY that I have personally e individual and found her/him to be physically an employment			Occumentary Stamp							
PRINTED NAME/SIGNATURE OF PHYSICIAN	CERTIFICATE NO.	OTHER INFO	RMATION AF	BOUT THE						
,	PROPOSED APPOINTEE									
· Mream										
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OFFICIAL DESIGNATION		HEIGHT . (Basefoot)	WEIGHT (Stripped)	BLOOD TYPE						
		153 cm	<del>153</del>	H						
AGENCY: Mearch upour III	DATE EXAMINED									
VSU HOSPITAL	DATE EXAMINE	,								
Visayas State University Visca, Baybay, Leyte, Philippines	1-12-17									