

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
Ponce Rogelio E			
ADDRESS			
Manos Baybay City			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
63	m	w	Regular

FOR THE LICENSED GOVERNMENT PHYSICIAN

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.				
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
 Christine Venus F. Capuno, M.D. Lic. No. 0156881				
AGENCY/Affiliation of Licensed Government Physician:				
VSA USTHER				
LICENSE NO.	0156881	HEIGHT (M) Bare Foot 144	WEIGHT (KG) Stripped 68.4	BLOOD TYPE O
OFFICIAL DESIGNATION		DATE EXAMINED		
Medical Officer III		1-12-23		

BP
120/80