

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) <i>Mangasany, Eurice Ed Relex Cruz</i>			AGENCY / ADDRESS <i>Brgy Pangasinan, Bantay ang Luzon</i>
ADDRESS <i>Block 1, lot 3, Luce Village, Bgy. Marcos, Bantay ang, Luzon</i>			
AGE <i>29</i>	SEX <i>M</i>	CIVIL STATUS <i>Single</i>	PROPOSED POSITION

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: <i>[Signature]</i> ELWIN JAY V. YU, MD, MPH. Chief of Hospital I License No. 098800		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE <i>[Signature]</i>	
AGENCY/Affiliation of Licensed Government Physician: <i>XEN Hospital</i>			
LICENSE NO. <i>098800</i>	HEIGHT (M) Bare Foot <i>186-3</i>	WEIGHT (KG) Stripped <i>66</i>	BLOOD TYPE <i>B⁺</i>
OFFICIAL DESIGNATION <i>Chief of Hospital</i>	DATE EXAMINED <i>5/24/24</i>		

7/10