## 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 MANIEGO, MARY POSE MILLETA ADDRESS PHU POT CHOPS WORGE CAUSES, IBMICH CAT, LITTE AGE SEX CIVIL STATUS PROPOSED POSITION 31 SINGIE CA STUAL 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  $\Box \mathit{FIT} / \Box \mathit{UNFIT}$  for employment. SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE Christelle Venus F. Capuno, M.D. Lic. No. 0155881 AGENCY/Affiliation of Licensed Government Physician: LICENSE NO. HEIGHT (M) WEIGHT (KG) BLOOD VITESSI NATION Medical Officer III Bare Foot Stripped TYPE 171 48. 5kg OFFICIAL DESIGNATION DATE EXAMINED Mend