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	
ALBER ADDRESS		VALIDA NARC-VSO		
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
GA	M	MAZINOD		

FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:	- fevi CA	D D		
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped 71 · 2 kgs	BLOOD TYPE	
OFFICIAL DESIGNATION	DATE EXAMINE	2	12/21	

BP-