## 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	e, First Name, Name Extensi	AGENCY / ADDRESS			
TA	VEROS AGI	NES MORANTIE	1/Kld Vinci		
ADDRESS			- VSU Visca,		
Cr	m, vsu, ru	Baybay City, Leyto			
AGE SEX		CIVIL STATUS .	PROPOSED POSITION		
28	7	Widowed	Prof. V		

## FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE over PRI		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE					
AGENCY/Affiliation of	M PVVI) f Licensed Governme	nt Physician:	R. Erm				
		Van					
LICENSE NO.		1/1/828		HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
DFFICIAL DESIGNATION				DATE EXAMINE	DATE EXAMINED		
	(10 on				Q-20-77		