

INSTRUCTIONS			
1. This medical certificate should be accomplished by a government physician. 2. Attached this certificate to original appointments and reinstatements.			
NAME (Last, First, Middle, or if married woman, Maiden Name) TUDTUD IMA. EPIFANIA GONZALES		AGENCY ADDRESS VSU	
ADDRESS VSU, BAYBAY, LEYTE			
AGE 50	SEX F	CIVIL STATUS M	PROPOSED POSITION AOV
Pre-Employment Medical-Physical Tests			
1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If necessary)			
FOR THE PHYSICIAN			
I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be physically and medically fit/unfit for employment			Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN ELWIN JAY V. YU. M.D. MEDICAL OFFICER IV		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE HVO Step I
OFFICIAL ID NO. VSU HOSPITAL LIC #098800		HEIGHT (Barefoot) 153.5cm	WEIGHT (Stripped) 74.3Kgs
AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines		BLOOD TYPE A+ 140/90 DATE EXAMINED 12/7/12	

Cont. Tellurite + Hct 2