CSC Form No. 211 (Revised August 1998) MEDICAL CERTIFICATE For Employment

INSTRUCTIONS	-	NS	TR	u	CT	10	NS
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 This medical certificate should be accomplished by a government physician. Attached this certificate to original appointments and reinstatements. 										
NAME (Last, First, Middle,	or if married woman, Maiden N	AGENCY ADDRESS								
ABUNAVES , MAY ADDRESS	YSU									
D. YELUSO ST.	BAYBAY									
AGE	SEX	CIVIL	PROP	OSED PO	SITION					
24	F	STATUS	Adn	nin. Ande	///					
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 CERITIFY individual and found here employment	1 77									
PRINTED NAME/SIGNATURE MERRY CHRISTLE, SPINELS Medical Office License No. 11	JNOCOR, M.D.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE								
OFFICIAL DESIGNATION		HEIGHT	WEIGHT	BLOOD TYPE						
			(Basefoot)	(Stripped)	80/wo					
105107			144 cm	43 kg	,					
AGENCY:	VSU HOSPITAL	DATE EXAMI	NED '							
Vis	sayas State University	3-10-7								
Visca, I		J 10 11								