

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

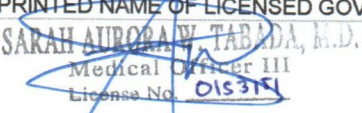
- a. This medical certificate should be accomplished by a licensed government physician.
 b. Attach this certificate to original appointment, transfer and reemployment.
 c. The results of the following pre-employment medical/physical/**psychological** must be attached to this form:

- ☒ Blood Test
☒ Urinalysis
☒ Chest X-Ray (1/25/22)
☒ 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
Macapanas Reynante Gamalo			Eco-FARMI
ADDRESS			
Guadalupe Paybay City Leyte			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
25	M	Single	Science Research Assistant

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 <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
 SARAH AURORA W. TABADA, M.D. Medical Officer III License No. 015314			
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.		HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped
		171	58.9
OFFICIAL DESIGNATION		BLOOD TYPE	
		DATE EXAMINED	
		3-23-2022	

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