## 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	on (if app	olicable)

## FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)				AG	AGENCY / ADDRESS		
Banda	bin, Man	150/1	Bryy, Rangasugan				
ADDRESS							
Brogg	. San	Isidio	Baybay City	Baylon	Why layte		
AGE 0	SEX CIVIL STATUS		PŔC	PROPOSED POSITION			
43	Male	M	amiel				

## FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exapove named individual and found him/her to be physically and medically			
SIGNATURE over PRINTED NAME OF UCENSED GOVERNMENT PHYSICIAN:  Elwin Jay V. Yu, M.D.  Chief of Hospital License No. 098800	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
OFFICIAL DESIGNATION •	DATE EXAMINE		
		6/4	

120/0