## MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS	
a. This medical certificate should be accomplished by a license b. Attach this certificate to original appointment, transfer and rec. The results of the following pre-employment medical/physical must be attached to this form:  Blood Test Urinalysis Chest X-Ray Drug Test Psychological Test Neuro-Psychiatric Examination (if applicable)	eemployment.
FOR THE PROPOSED APPO	DINTEE
NAME (Last Name, First Name, Name Extension (if any) and Middle Name)	AGENCY / ADDRESS

## ADDRESS tisages state university Cottage L. caplex Havarg, viscus state liverity CIVIL STATUS AGE SEX PROPOSED POSITION 20 Female Single Instructor

above named individual and found him/her to be physically and medically,	ZIFIT / DUNFIT	for employmer	it.	
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN  MERRY CHRISTLI, SUPNET-GUNCOR, M.D.  Medical Officer III License No. 111828		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:				
ICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
FFICIAL DESIGNATION	DATE EXAMINE	DATE EXAMINED		
	12.9.26			