

**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 (if applicable)

**FOR THE PROPOSED APPOINTEE**

NAME (Last Name, First Name, Name Extension (if any) and Middle Name) <b>Dargantes, Virgelo Jr. Capungco</b>			AGENCY / ADDRESS
ADDRESS <b>Sta. Cruz, Baybay City Leyte</b>			
AGE <b>32</b>	SEX <b>Male</b>	CIVIL STATUS <b>Married</b>	PROPOSED POSITION <b>Instructor I</b>

**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 ☒ **FIT** / ☐ **UNFIT** for employment.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  <b>MERRY CHRISTL T. SUPNET-QUINOCOR, M.D.</b>		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot <b>162</b>	WEIGHT (KG) Stripped <b>73.5</b>	BLOOD TYPE <b>O+</b>
OFFICIAL DESIGNATION	DATE EXAMINED <b>6-21-22</b>		

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