

**MEDICAL CERTIFICATE**  
(For Employment)

**INSTRUCTIONS**

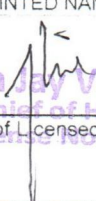

- a. This medical certificate should be accomplished by a licensed government physician.  
b. Attach this certificate to original appointment, transfer and reemployment.  
c. The results of the following pre-employment medical/physical/**psychological** must be attached to this form:

- ☐ 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)<br><b>ESTOR, LOVELY MAE JABINES</b> |                      |                               | AGENCY / ADDRESS<br><b>VISAYAS STATE UNIVERSITY<br/>VISCA, DAYDAY CITY, LEYTE</b> |
| ADDRESS<br><b>ZONE 28, 20 DE DICIEMBRE ST., DAYDAY CITY, LEYTE</b>  |                      |                               |   |
| AGE<br><b>22</b>  | SEX<br><b>FEMALE</b> | CIVIL STATUS<br><b>SINGLE</b> | PROPOSED POSITION<br><b>SUB. INSTRUCTOR I</b>                                     |

**FOR THE LICENSED GOVERNMENT PHYSICIAN**

|   |   |   |                         |
|---|---|---|-------------------------|
| <i>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.</i> |   |   |                         |
| SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:<br><br><b>Elwin Jay V. Yu, M.D.</b><br><i>Chief of Hospital</i>  |   | OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE<br> |                         |
| AGENCY/Affiliation of Licensed Government Physician:  |   |   |                         |
| LICENSE NO.   | HEIGHT (M)<br>Bare Foot<br><b>151.2</b> | WEIGHT (KG)<br>Stripped<br><b>52.4</b>  | BLOOD TYPE<br><b>O+</b> |
| OFFICIAL DESIGNATION  |   | DATE EXAMINED<br><b>1/28/22</b>   |                         |

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