

## 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>CABARDO, DELFIN, JR. ESCUADRA</b>			AGENCY / ADDRESS
ADDRESS <b>BRGY. STO. ROSARIO RAUBAY CID, LEYTE</b>			
AGE <b>28 Y.O</b>	SEX <b>Male</b>	CIVIL STATUS <b>SINGLE</b>	PROPOSED POSITION

## 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 <u>him</u> /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:  <b>MERRY CHRIST'L T. SUPNET-GINOCOR, M.D.</b> <i>Merry</i>		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot <b>162 cm</b>	WEIGHT (KG) Stripped <b>74.2 kg</b>	BLOOD TYPE <b>"A+"</b>
OFFICIAL DESIGNATION	DATE EXAMINED <b>1-7-19</b>		

BP -  
110/70  
mmHg