

**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)			AGENCY / ADDRESS
ARMADA, AMEL ROX			VSU DARABAY CITY
ADDRESS			
VSU, TRINER'S QUARTER, DARABAY			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
47	MALE	MARRIED	ADM. ASST. V

**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 <u>him</u>/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:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
 MERRY CHRISTL T. SUPNET-GUINOCOR, M.D. License No. 111828			
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	172	70	O
OFFICIAL DESIGNATION	DATE EXAMINED		
	7-2-21		

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