

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS


- This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- 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) OCHAVILLO, EDGARDO CEQUINA			AGENCY / ADDRESS DME
ADDRESS 540 F. CELEDIO, DAMULAN, ALBUERA, LEYTE			
AGE 35	SEX MALE	CIVIL STATUS SINGLE	PROPOSED POSITION INSTRUCTOR I

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 type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.</i>			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  MERRY CHESTO 11828 MEDICAL OFFICER		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot 167 cm	WEIGHT (KG) Stripped 54 kg	BLOOD TYPE B+
OFFICIAL DESIGNATION	DATE EXAMINED 8-19-21		