

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)

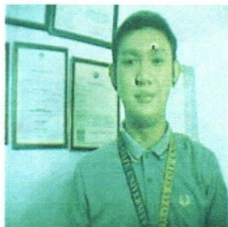
FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name) BITACURA, JAYZEN, GASPAY			AGENCY / ADDRESS VISAYAS STATE UNIVERSITY/ VISCA, BAYBAY CITY, LEYTE
ADDRESS GABAS, BAYBAY CITY, LEYTE			
AGE 72	SEX MALE	CIVIL STATUS SINGLE	PROPOSED POSITION ASSISTANT PROFESSOR III

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: Elwin Jay V. Yu, M.D. Chief of Hospital License No. 009800		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot 172	WEIGHT (KG) Stripped 68.5	BLOOD TYPE O⁺
OFFICIAL DESIGNATION	DATE EXAMINED 11/14/19		

172
50



RJ981787
75

DEPARTMENT OF HEALTH
CDU DRUG TESTING LABORATORY
MAGSAYSAY AVE., POBLACION ZONE 22, BAYBAY, LEYTE,

Phone Number 053-335-2849

DRUG TEST REPORT

CCF No: 201911140021
Name: BITACURA, JAYZON G.
Birthdate: 09/17/1987 Age: 32

Gender: M

Transaction Date Time: 11/14/2019 2:57:00PM
Report Date Time: 11/14/2019 3:05:05PM

Test Method TEST KIT

Purpose

Others

Requesting Parties

VISAYAS STATE UNIVERSITY

Result

Drug/Metabolite	Result	Remarks
METHAMPHETAMINE	NEGATIVE	
TETRAHYDROCANNABINOL	NEGATIVE	

Test Conducted By

28

Cauv
CRESELDA DUMAGUING UY

Analyst

Approved By

[Signature]
DR. REYNALDO P. ESQUIVEL

62

Head of Laboratory

Valid Within 12 Month/s from Transaction Date

This is a DOH-DDB IDTOMIS generated report