1-4-17

CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

IN	STRUCTIONS			
 This medical certificate should be a Attached this certificate to original 				
NAME (Last, First, Middle, or if married woman, Maiden Name) Formes, Mercedes V.		VSU		
ADDRESS				
208 Tres Martires 87.,	Baybay City	Adn	un. Ai	de III
AGE SEX Female	CIVIL	PROPOSED POSITION		
	ent Medical-Physica	Tests		
Chest X-ray Drug Test Neuro-Psychi	atric Examination (If	necessary)	
4. Drug Test 5. Neuro-Psychi	atric Examination (If	necessary)	
4. Drug Test 5. Neuro-Psychi FOR I HEREBY CERITIFY that I have personal individual and found her/him to be physically	THE PHYSICIAN	-named	Affix D	Pocumentary Stamp
4. Drug Test 5. Neuro-Psychi FOR I HEREBY CERITIFY that I have personal individual and found her/him to be physically employment PRINTED NAME/SIGNATURE OF PHYSICIAN	THE PHYSICIAN	e-named it for	Affix D	Stamp
4. Drug Test 5. Neuro-Psychi FOR I HEREBY CERITIFY that I have personal individual and found her/him to be physically employment PRINTED NAME/SIGNATURE OF PHYSICIAN Mey (MASH) 7. June 7. Same	THE PHYSICIAN lly examined the above and medically fit/unf	o-named it for OTHER INFO PROPOSED	Affix D	Stamp BOUT THE
4. Drug Test 5. Neuro-Psychi FOR I HEREBY CERITIFY that I have personal individual and found her/him to be physically employment PRINTED NAME/SIGNATURE OF PHYSICIAN Mey (MINST) 3. JUNES - Grand	THE PHYSICIAN lly examined the above and medically fit/unf	e-named it for OTHER INF PROPOSED HEIGHT (Banefoot)	ORMATION AS APPOINTEE WEIGHT (Stripped)	BLOOD TYPE
4. Drug Test 5. Neuro-Psychi FOR I HEREBY CERITIFY that I have personal individual and found her/him to be physically employment PRINTED NAME/SIGNATURE OF PHYSICIAN	THE PHYSICIAN lly examined the above and medically fit/unf	onamed it for OTHER INFO PROPOSED HEIGHT	ORMATION AE APPOINTEE WEIGHT (Stripped) 59-1kg	Stamp BOUT THE

Visayas State University Visca, Baybay, Leyte, Philippines