

**MEDICAL CERTIFICATE**

For Employment

**INSTRUCTIONS**

1. This medical certificate should be accomplished by a government physician.
2. Attached this certificate to original appointments and reinstatements.

NAME (Last, First, Middle, or if married woman, Maiden Name)			AGENCY ADDRESS		
OTIDA, Leonarda Piza			VSU		
ADDRESS					
Joni Abad Santos St. Baybay City					
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
41			Adm. Asst. III		
Pre-Employment Medical-Physical Tests					
<ol style="list-style-type: none"> <li>1. Blood Test</li> <li>2. Urinalysis</li> <li>3. Chest X-ray</li> <li>4. Drug Test</li> <li>5. Neuro-Psychiatric Examination (If necessary)</li> </ol>					
<b>FOR THE PHYSICIAN</b>					
I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be physically and medically fit/unfit for employment					Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
JOSEPHINE O. ZAFICO, M.D. Medical Officer III License No. 075699					
OFFICIAL DESIGNATION			HEIGHT (Barefoot)	WEIGHT (Stripped)	BLOOD TYPE
M.D.			152cm	51kg	B
AGENCY:			DATE EXAMINED		
VSU HOSPITAL Visayas State University Visca, Baybay City, Leyte, Philippines					

Pr  
110770