MEDICAL CERTIFICATE

(For Employment)

-	N	S	T	R	U	C	T	10	NS

- 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:

ne ar	ached to this form
N	Blood Test
	Urinalysis
D	Chest X-Ray
	Drug Test
	Psychological Te

☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

PRINCIPAL OF THE REAL PRINCIPAL PRIN	e, First Name, Name Extens	AGENCY / ADDRESS	
ADDRESS	VSU CO	and with the second section of the second community which the second control of the seco	NCRC
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
45	F	M	Associate Professor 4

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exabove named individual and found him/her to be physically and medically ESIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:				
DR. MFRRY CHRIST'L CUPPET - GUINOCOR AGENCY/Affiliation of Licensed Government Physician: Medical officer			www.u.c.u.gu) med philosophic percentile 2000	
LICENSE NO.	HEIGHT (M) Bare Foot 1.57	WEIGHT (KG) Stripped	BLOOD TYPE	
OFFICIAL DESIGNATION	DATE EXAMINE	- 27		