

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

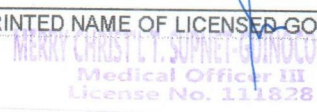
- a. This medical certificate should be accomplished by a licensed government physician.
- b. Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/psychological must be attached to this form:

- ☒ 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) <i>Colunga, BERTALDO M</i>			AGENCY / ADDRESS	
ADDRESS <i>Guadalupe, Baybay CITY, Leyte</i>			VSU, NARC	
AGE <i>61</i>	SEX <i>M</i>	CIVIL STATUS <i>M</i>	PROPOSED POSITION <i>Lab. Tech. I</i>	

FOR THE LICENSED GOVERNMENT PHYSICIAN

<p><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></p>			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: <div style="text-align: center;">  Merit Christy L. Sumner-Guindocor, M.D. Medical Officer III License No. 111828 </div>		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:		<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> HEIGHT (M) Bare Foot <i>154cm</i> </div> <div style="width: 20%;"> WEIGHT (KG) Stripped <i>51kg</i> </div> <div style="width: 20%;"> BLOOD TYPE <i>O+</i> </div> </div>	
LICENSE NO.			
OFFICIAL DESIGNATION			
		DATE EXAMINED <i>12-7-21</i>	

BP:
130/80