

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) CAPRICHO, JOSE ROSE B			AGENCY ADDRESS DASS, VSU Visca, Baybay City, Leyte		
ADDRESS DASS, VSU					
AGE 52 yrs old	SEX Female	CIVIL STATUS M	PROPOSED POSITION Adm. Aide IV		
<p align="center">Pre-Employment Medical-Physical Tests</p> <ol style="list-style-type: none"> 1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If necessary) <p align="center">) All to up in</p>					
<p align="center">FOR THE PHYSICIAN</p>					
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 ELWIN JAY V. YU, M.D.		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE Frenia, et al (?)		
OFFICIAL DESIGNATION MEDICAL OFFICER IV HEAD, VSU HOSPITAL LIC #098800		HEIGHT (Barefoot) 162cm	WEIGHT (Stripped) 78cm	BLOOD TYPE "B"	
AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines			DATE EXAMINED 6/19/13		