

<b>INSTRUCTIONS</b>			
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	
BUSTILLO, NORIETA BATHAN			
ADDRESS			
672 A. BENIPALCO ST., MAYMAY			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
30	F	M	ADMIN AIDE 01
Pre-Employment Medical-Physical Tests			
1. <input checked="" type="checkbox"/> Blood Test 2. <input checked="" type="checkbox"/> Urinalysis 3. <input checked="" type="checkbox"/> Chest X-ray 4. <input checked="" type="checkbox"/> Drug Test 5. Neuro-Psychiatric Examination (If necessary)			
<b>FOR THE PHYSICIAN</b>			
I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be <u>physically and medically fit/unfit</u> for employment			Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE
MERRY CHRIST'L T. SUPNET-GUINOCOR, M.D. Medical Officer III License No. 111828			
OFFICIAL DESIGNATION		HEIGHT (Barefoot)	WEIGHT (Striped) BLOOD TYPE
NATION		154cm	57.8kg 4-1
AGENCY:		DATE EXAMINED	
VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines		4-27-11	