MEDICAL CERTIFICATE

(For Employment)

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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

FOR THE PROPOSED APPOINTEE

☐ Neuro-Psychiatric Examination (if applicable)

	First Name, Name Extensi	AGENCY / ADDRESS		
ADDRESS LINAO	, ornoe	cID	WIN -BABAY CITY	
AGE 35	SEX	CIVIL STATUS SWGLE	PROPOSED POSITION	

FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: MERRY (HRST I SUPPLIFIED NAME OF LICENSED GOVERNMENT PHYSICIAN: Medical Officer II License No. 111826	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
AGENCY/Affiliation of Licensed Government Physician:				
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
OFFICIAL DESIGNATION	DATE EXAMINED			
. Medical Oggran (4)	4-29-24			

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