

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)			AGENCY / ADDRESS
LINGATON, NICASIO DIUG			USU - BAYBAY
ADDRESS			
BULEY. MARCOS, BAYBAY CITY, ICTE			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
36	MALE	MARRIED	UTILITY / MESSENGER

FOR THE LICENSED GOVERNMENT PHYSICIAN

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 ☒ FIT / ☐ UNFIT for employment.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
CHRISTELLE VERUS F. CAPUNO, M.D. MEDICAL OFFICER III LICENSE NO. 0156881			
AGENCY/Affiliation of Licensed Government Physician:			
USU Hospital			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
0156881	1.7m	79.5kg	O+
OFFICIAL DESIGNATION	DATE EXAMINED		
Medical Officer II	2 June 2025		

BS  
100  
70 mmHg

(Neuro Psychiatric Test)  
Ormoc City (053-832-3123)

Date: 05/22/2025

**PURPOSE OF EXAMINATION:** EMPLOYMENT  
**NAME:** LINGATONG, NICASIO B. **Age:** 36 **SEX:** MARRIED  
**HOME ADDRESS:** BAYBAY CITY, LEYTE  
**EDUCATIONAL ATTAINMENT:** HIGH SCHOOL GRADUATE  
**PURPOSE/ DATE OF PREVIOUS NP EXAMINATION** \_\_\_\_\_

FACTORS	ABSENT	LOW	AVERAGE	HIGH
<b>INTELLIGENCE</b>				
1. Capacity for Abstraction			x	
2. Organizational Capacity			x	
3. Learning Activities			x	
4. Alertness			x	
<b>MANNER OF COMMUNICATION PREFERRED</b>				
1. Verbal			x	
2. Non-Verbal			x	
<b>EMOTIONAL STABILITY</b>				
1. Coping with Stress			x	
2. Control of Aggressive hostile impulse			x	
3. Free from neuro tendencies			x	
<b>VALUES</b>				
1. Positive			x	
2. Negative			x	
<b>EDUCATION:</b> <del>Relevant Training</del>			x	
<b>EXPERIENCE:</b> Security Training				
Handling Guns				
Others:				
<b>MOTIVATION:</b> Security Reasons			x	
Self-esteem / confidence				
Others:				
<b>SOCIAL ADAPTABILITY:</b>				
1. With people in general			x	
2. With peers			x	
3. With supervisor			x	
4. With subordinates			x	
<b>WORK ATTITUDES:</b>				
1. Responsibility			x	
2. Loyalty			x	
3. Perseverance			x	
4. Initiative			x	

**REMARKS**  
 Psychological: No gross psychological abnormality  
 Negative psychiatric disorder.


**RECOMMENDATION**

**FOR FIREARMS LICENCE**

☐ Recommended for possession  
☐ Recommended permit to carry  
☐ Needs training on handling to carry  
☐ Not recommended

**FOR SECURITY GUARDS/OTHERS**

☒ Recommended with  
☐ Recommended risk  
☐ Needs training  
☐ Not recommended

  
**LYN L. VERONA, MD**  
 Psychiatrist / NP Screener  
 Accreditation / PRC No. 80515