## 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, Fi	st Name, Name Extension (if ar	y) and Middle Name)	AGENCY / ADDRESS
PATIN	DOL, TEOTA	ANES ANDOY	VS() BAYBAY
APT 8	- /	AYBAY CITY	CITY, LEYTE
AGE 57	MALE	MARRIED	PROPESSOR IV

## FOR THE LICENSED GOVERNMENT PHYSICIAN

10-4 wzz		
DATE EXAMINED		
lason	68	A
Bare Foot	Stripped	TYPE
HEIGHT (A)	WEIGHT	BLOOD
PROPOSED APPOINTEE		
OTLIED IN	EODMATION AD	OUTTUE
	HEIGHT (M) Bare Foot	HEIGHT (M) WEIGHT (KG) Bare Foot Stripped  WANTED THE STRIPPED TO