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

	me, First Name, Name Exten	AGENCY / ADDRESS WWW, VISCO, BAYBAY	
ADDRESS	ngas, Hilapn	itan, Baybay	ार्य, प्रमान
AGE 33	SEX	CIVIL STATUS SINGLE	PROPOSED POSITION 7. 96 HF HFO II

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exabove named individual and found him/her to be physically and medically	FIT / DUNFIT	ts, personally e for employment	xamined the
Dr. Meny Christ Guino Cor	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD OT
MO III	DATE EXAMINED		