

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:

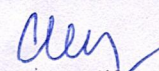
- ☒ Blood Test
☒ Urinalysis
☒ Chest X-Ray
☐ Drug Test
☐ Psychological Test
☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name) FLORES, MARIA ZALDA			AGENCY / ADDRESS NARC
ADDRESS SAYDAY CITY, LETE			
AGE 57	SEX F	CIVIL STATUS S	PROPOSED POSITION CASUAL

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:  Christelle Venus F. Capuno, M.D.		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician: U.S. NO. 0155001			
LICENSE NO.	HEIGHT (M) Bare Foot 1.54 m	WEIGHT (KG) Stripped 40.5 kgs.	BLOOD TYPE
OFFICIAL DESIGNATION		DATE EXAMINED 13 January 2015	