

## CSC Form No. 211 (Revised August 1998) MEDICAL CERTIFICATE For Employment

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<ol> <li>This medical certificate should be accomplished by a government physician.</li> <li>Attached this certificate to original appointments and reinstatements.</li> </ol>											
NAME (Last, First, Middle, or if married woman, Maiden	AGENCY ADDRESS										
ROLA, JUDE B	VSU, VISCA, BAPKAP										
ADDRESS			CITY								
APT. 20, VSU, VISCA, 13 APRATE CIT		l	10116								
AGE SEX	CIVIL	PROF	POSED PO	SITION							
38 m	STATUS										
Pre-Employment Medical-Physical Tests											
<ul> <li>Blood Test</li> <li>Urinalysis</li> <li>Chest X-ray</li> <li>Drug Test</li> <li>Neuro-Psychiatric Examination (If necessary)</li> </ul>											
FOR THE PHYSICIAN											
I HEREBY CERITIFY that I have personally eindividual and found her/him to be physically an employment											
PRINTED NAME/SIGNATURE OF PHYSICIAN	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE										
MUGUEU		PROPOSED	APPOINTEE								
Mond chuzu 1. Tohust. ennon	1412										
OFFICIAL DESIGNATION		HEIGHT	WEIGHT	BLOOD TYPE							
		(Basefoot)	(Stripped)	le co							
MINICO MADA III	1700	teh	0								
AGENCY: VSU HOSPITAL	DATE EXAMI	NED									
VSU HOSPITAL  Visayas State University											
Visca, Baybay, Leyte, Philippines	1-5-17										