

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		
Julino, Janice Planes					
ADDRESS					
Guadalupe (Utod), Baybay City, Legte					
AGE	SEX	CIVIL STATUS			
44	Female	Married			

FOR THE LICENSED GOVERNMENT PHYSICIAN

<p style="font-size: small;">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 <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.</p>					
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:			OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
Mary Ann T. Supna - Bulina <i>on medical file see</i>					
AGENCY/Affiliation of Licensed Government Physician:					
VCA Hospital Legte					
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped			
OFFICIAL DESIGNATION			DATE EXAMINED		
Medical Officer II			6-29-23		

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(For Employment)

INSTRUCTIONS

- This medical certificate should be accomplished by a licensed government physician.
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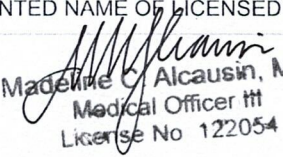
- Blood Test
- Urinalysis
- Chest X-Ray
- Drug Test
- Psychological Test

FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS
JULIANO, JANICE PLANES			Visayas State University Bacolod City, Negros
ADDRESS			
Sauyo, Novaliches, Quezon City			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
44	FEMALE	MARRIED	Internal Auditor "

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		
 Madeline C. Alcausin, M.D. Medical Officer III License No 122054				
AGENCY/Affiliation of Licensed Government Physician:				
Department of Social Welfare and Development				
LICENSE NO.	HEIGHT (M)	WEIGHT (KG)	BLOOD TYPE	
PRC LIC. NO. 0122054	Bare Foot	Stripped		
	1.52	55	A+	
OFFICIAL DESIGNATION	DATE EXAMINED			
Medical Officer III	04-Jun-25			