

INSTRUCTIONS

1. This medical certificate should be accomplished by a government physician..
2. Attached this certificate to original appointments and reinstatements.

NAME (Last, First, Middle, or if married woman, Maiden Name)			AGENCY ADDRESS		
Guanti, Roberto					
ADDRESS					
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
<p>Pre-Employment Medical-Physical Tests</p> <ol style="list-style-type: none"> 1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If necessary) <p><i>Ref to inf file</i></p>					
<p>FOR THE PHYSICIAN</p>					
<p>I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be physically and medically fit/unfit for employment</p>					<p>Affix Documentary Stamp</p>
PRINTED NAME/SIGNATURE OF PHYSICIAN		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
 ELWIN JAY V. YU, M.D.		098800	me		
OFFICIAL DESIGNATION			HEIGHT (Barefoot)	WEIGHT (Stripped)	BLOOD TYPE
Medical Officer IV			162c		O ⁺
AGENCY:			DATE EXAMINED		
VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines			11/13/11		

*Increase fluid intake
 for repeat urinalysis after 1 week*

Ref 11/13/11