## 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	
DAC	LAG, JOCE	ELYN GUNDAYA	VISAYAS STATE UNIVERSITY	
R. MAGS AYSAY AVE, BAYBAY CITY LEYTE			BAYBAY CITY, LEYTE	
43	F	MARRIED	ASSOCIATE PROF. 3	

## FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached ex	camination result	ts personally e	examined the
above named individual and found him/her to be physically and medically			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:	5.00		
NW			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
111821	151 cm	47 kg	B+
OFFICIAL DESIGNATION	DATE EXAMINED		
MO IN	OCT. 5, 2022		