

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)<br><b>ARTIGA, EDILBERTO JR. II ACASIO</b> |                    |                                | AGENCY / ADDRESS<br><b>I H K</b>         |
| ADDRESS <b>1352, ZONE 2, BRGY. GUADALUPE<br/>BAYDAY CITY, LEYTE</b>   |                    |                                |  |
| AGE<br><b>29</b>  | SEX<br><b>MALE</b> | CIVIL STATUS<br><b>MARRIED</b> | PROPOSED POSITION<br><b>INSTRUCTOR I</b> |

FOR THE LICENSED GOVERNMENT PHYSICIAN

|   |                                       |  |                        |
|---|---------------------------------------|--|------------------------|
| <i>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.</i> |                                       |  |                        |
| SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:<br><br><b>MERRY CHRISTY T. SIQUIT, MD</b>  |                                       | OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE |                        |
| AGENCY/Affiliation of Licensed Government Physician:<br><b>111828</b>   |                                       |  |                        |
| LICENSE NO.   | HEIGHT (M)<br>Bare Foot<br><b>172</b> | WEIGHT (KG)<br>Stripped<br><b>69.54</b>        | BLOOD TYPE<br><b>O</b> |
| OFFICIAL DESIGNATION  | DATE EXAMINED<br><b>7-28-21</b>       |  |                        |

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