## MEDICAL CERTIFICATE

(For Employment)

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	
larrazaba	al, Alama Gal	oisory	Visayas state University,	
Brgy. Pargasugan, Bowbow, Gty			Brogy. Pargasugan, Baybay, Crhy	
24	Female	Single	Instructor	

## FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached 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:  Elwin Jay V. Yu, M.D.			
LICENSE NO. License No. 098800	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	156.8cm	56.4 logs	
OFFICIAL DESIGNATION	DATE EXAMINED		
		9/23/2	