CS Form No.
Revised 2018

211

MACANHA

## MEDICAL CERTIFICATE (For Employment)

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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

> ☐ Psychological Test ☐ Neuro-Psychiatric Examination (if applicable)

☑ Drug Test

ATALAMT ACABA

## FOR THE PROPOSED APPOINTEE NAME (Last Name, First Name, Name Extension (if any) and Middle Name)

NIA, IZENATOJE.	College of V-eternory Medicine	
oug So., mozonogon	Postern Samar	Medicine
SEX	CIVIL STATUS	PROPOSED POSITION
Male	Siuge	
FOR THE	LICENSED GOVERNM	ENT PHYSICIAN
	ang So., Mozonogan SEX Male	0.1

I hereby certify that I have reviewed and evaluated the attached example above named individual and found him/her to be physically and medically	amination result FIT / □UNFIT t	s, personally e for employment	xamined the	
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE			
Clly	PROPOSED APPOINTEE			
Christile Henry R. Compa., M.O. Lic. No. 0155881				
AGENCY/Affiliation of Licensed Government Physician:				
Usu aptiEn				
LICENSE NO.	HEIGHT (M)	WEIGHT (KG)	BLOOD	

Bare Foot Stripped 0156881 90 top(. 1.68 m OFFICIAL DESIGNATION DATE EXAMINED Medical Officer 11

TYPE

AGENCY / ADDRESS