CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

NAME (Last, First, Middle, or if married woman, Maiden Name) Lao, Magrolia Clifur			DOHM, VSU, Baybay City		0.25
	rive, VSU, Visca, &			yte	, ,
AGE 4D	SEX Female	STATUS Married	PROPOSED POSITION		
	Pre-Employm	nent Medical-Physica	al Tests		
	2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psych	iatric Examination (//	f necessar y)	
	FOR	THE PHYSICIAN			
individual and found	FOR IFY that I have persona her/him to be physicall	ally examined the abov		- Mark 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12	Documentary Stamp
individual and found employment	IFY that I have persona her/him to be physicall URE OF PHYSICIAN CHANGE OF PHYSICIAN OF THE CONTROL OF THE CONT	ally examined the abov	fit for	- Mark 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12	Stamp
individual and found employment PRINTED NAME/SIGNAT MERRY CHRISTL T. SUP	IFY that I have persona her/him to be physicall URE OF PHYSICIAN CHANGE OF PHYSICIAN OF THE CONTROL OF THE CONT	ally examined the abov y and medically fit/uni	fit for	ORMATION A	Stamp