## 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:

V	Blood	Test
1	Urinal	ysis

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		
AS6Y ADDRESS	, ANGELICA	CASTILLO			
CAMIA COTTAGE, VEW LOWER CAMPUS, BAYBAY CITY					
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
26	FEMALE	CINGLE	LARBTRATORY TECHNICIAN 11		

## FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the

SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  (Inistelle Venus F. Caguno, M.D.  Lic. No. 0156881	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:			
veu when			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD
012,821	153	48	AT
OFFICIAL DESIGNATION	DATE EXAMINED		
Maica officer 111	December 5, ron		

BP 90/70