CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

 This medical certificate should be accomplished by a government physician. Attached this certificate to original appointments and reinstatements. 					
NAME (Last, First, Middle, or if married woman, Maiden Name)		AGENCY ADDRESS			7
ESPINIOSA, MATOHIO CASTANAS ADDRESS		VSU, VICE BAY BAY BAY			1
729 MARCOS BARRAY CITY (EYTE		City Ceyre			
AGE SEX	CIVIL	PROPOSED POSITION			
57 M	STATUS	PERMONIAIT			
Pre-Employment Medical-Physical Tests					
1. Blood Test 2. Urinalysis 3. Chest X-ray					
Drug TestNeuro-Psychiatric Examination (If necessary)					
FOR THE PHYSICIAN					
I HEREBY CERITIFY that I have personally examined the above-name individual and found her/him to be physically and medically fit/unfit for employment					
PRINTED NAME/SIGNATURE OF PHYSICIAN MERRY (HRISTLT, SUPNET-GUINOCOK, M.D., Medical Officer III License No. 111828	CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			The state of the s
OFFICIAL DESIGNATION		HEIGHT (Barefoot)	WEIGHT (Stripped) G5 · 2 1495	BLOOD TYPE	120/8
VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines		DATE EXAMINED 7-7-17			A company and a company of the compa