

**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:

- ☒ 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
LOR, LETTY JEAN CAYANONG			NCRC
ADDRESS Mora Pangasinan, Maybay City Centre			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
31	Female	Married	

**FOR THE LICENSED GOVERNMENT PHYSICIAN**

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
 Christelle Venus F. Capuno, M.D. License No. 156881			
AGENCY/Affiliation of Licensed Government Physician: Ula Hospital			
LICENSE NO.	0106881	HEIGHT (M) Bare Foot 1.48	WEIGHT (KG) Stripped 72.4
OFFICIAL DESIGNATION Medical Officer III		BLOOD TYPE	
		DATE EXAMINED 29 July 2014	