## 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

☐ Drug Test

☐ Psychological Test

☐ Neuro-Psychiatric Examination (if applicable)

## FOR THE PROPOSED APPOINTEE

	e, First Name, Name Extension, JULIEN	DPBG - Department of Plant Breeding and Genetics.			
ADDRESS S	anta Cruz, Bou	olbay, Leyfe **	breeding and benefics.		
AGE 34	SEX	CIVIL STATUS MARRIED	PROPOSED POSITION  [NSTRUCTOR ]		

## FOR THE LICENSED GOVERNMENT PHYSICIAN

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 f	s, personally or employmer	examined the nt.	
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  Christelle Venus F. Capuno, M.C.  Iir No. 0156881  AGENCY/Affiliation of Licensed Government Physician:  W.W. WHER.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
OFFICIAL DESIGNATION	DATE EXAMINED 18 July 2023			
Inedical Officer (11				