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:

0	Blood Test	
	Urinalysis	
	Chest X-Ray	
	Drug Test	
	Psychological Test	
D	Neuro-Psychiatric Examination	(if applicable

FOR THE PROPOSED APPOINTEE

NAME (Last Name, Fir	st Name, Name Extension	(if any) and Middle Name)	AGENCY / ADDRESS		
Plenos M	ary Cris +	loves	Viscyas	Ade University	
ADDRESS '				· ·	
Brogy. Matap	ay Hilongus	, Leyte			
AGE	SEX	CIVIL STATUS	PROF	POSED POSITION	
24	Female	Single	Justine	to I	

FOR THE LICENSED GOVERNMENT PHYSICIAN

	5-14-19			
OFFICIAL DESIGNATION	DATE EXAMINED			
	Miscm	Faks		
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
AGENCY/Affiliation of Licensed Government Physician:				
MERN (HIST I SUNIT MOCOR, M.D. Medical Officer III License No. 111828	PROF	PROPOSED APPOINTEE		
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE			
I hereby certify that I have reviewed and evaluated the attached e above named individual and found him/her to be physically and medically	examination results	s, personally e for employmen	examined the nt.	