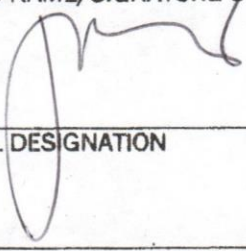


<b>INSTRUCTIONS</b>				
1. This medical certificate should be accomplished by a government physician.				
2. Attached this certificate to original appointments and reinstatements.				
NAME (Last, First, Middle, or if married woman, Maiden Name) Alvarado, Herminia R			AGENCY ADDRESS Baybay City	
ADDRESS Alvarado Lgt				
AGE 60	SEX F	CIVIL STATUS S	PROPOSED POSITION Promotion	
Pre-Employment Medical-Physical Tests				
1. Blood Test				
2. Urinalysis				
3. Chest X-ray				
4. Drug Test				
5. Neuro-Psychiatric Examination (If necessary)				
7. Ref to file				
<b>FOR THE PHYSICIAN</b>				
I HEREBY CERTIFY that I have personally examined the above-named individual and found <u>her/him</u> to be physically and medically fit/unfit for employment			Affix Documentary Stamp	
PRINTED NAME/SIGNATURE OF PHYSICIAN 		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
OFFICIAL DESIGNATION		HEIGHT (Barefoot) 144 cm	WEIGHT (Stripped) 62.8 kg	BLOOD TYPE O <sup>+</sup>
AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines		DATE EXAMINED 10/13/15		

Blp  
no/fo