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/mental examinations 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 AGENCY / ADDRESS NAME (Last Name, First Name, Name Extension (if any) and Middle Name) ADDRESS St. Bemard AGE PROPOSED POSITION SEX CIVIL STATUS 26 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 fourful him/her to be physically and medically \(\sigma \overline{FIT} / \square UNFIT \) for employment. SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: OTHER INFORMATION ABOUT THE Elwin Jay V. Yu, M.D. Chief of Hospital T PROPOSED APPOINTEE License No. 098800 AGENCY/Affiliation of Licensed Government Physician: BLOOD HEIGHT (M) WEIGHT (KG) LICENSE NO. TYPE Bare Foot Stripped 01 159 cm 6459 kgs OFFICIAL DESIGNATION DATE EXAMINED

10/0