

## MEDICAL CERTIFICATE

(For Employment)

### INSTRUCTIONS

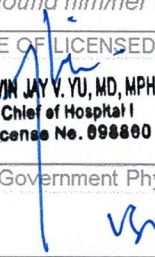


- This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- The results of the following pre-employment medical/physical/**psychological** must be attached to this form:

- ☐ 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) <b>CERNA, DENNIS JOEL LORETO</b>			AGENCY / ADDRESS <b>VISAYAS STATE UNIVERSITY, Visca, Baybay City, Leyte</b>
ADDRESS <b>POBLACION, ALBUERA, LEXE</b>			
AGE <b>28</b>	SEX <b>MALE</b>	CIVIL STATUS <b>SINGLE</b>	PROPOSED POSITION <b>INSTRUCTOR III</b>

### FOR THE LICENSED GOVERNMENT PHYSICIAN

<i>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.</i>			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  <b>ELWIN JAY V. YU, MD, MPH.</b> Chief of Hospital I License No. 098880		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE 	
AGENCY/Affiliation of Licensed Government Physician: 			
LICENSE NO.	HEIGHT (M) Bare Foot <b>160</b>	WEIGHT (KG) Stripped <b>76.5</b>	BLOOD TYPE <b>"O+"</b>
OFFICIAL DESIGNATION	DATE EXAMINED <b>5/3/24</b>		

mr 10770