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:

Blood Test
Urinalysis
Chest X-Ray
Drug Test
Psychological Test

■ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Na	me, First Name, Name Exten	sion (if any) and Middle Name)	AGENCY / ADDRESS
IST	WPA, D10.	VSU-DOST	
ADDRESS			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
44	M	Mouried	LABREH

FOR THE LICENSED GOVERNMENT PHYSICIAN

Bare Foot SU CM ATE EXAMINE	Stripped 6015 KJ	At
Bare Foot	Stripped	AT
		TYPE
HEIGHT (M)	WEIGHT (KG)	BLOOD
	WEIGHT (KG) Stripped	
OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
	OTHER INI PROI	OTHER INFORMATION AB PROPOSED APPOIN