MEDICAL CERTIFICATE

(For Employment)

INSTRUCTION	S
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- 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

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)

- ☐ Drug Test ☐ Psychological Test
- ☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

BAR	REDO, BAYRE	BAYBAY OITY, LEYTE		
ADDRESS	24			
AGE SEX CIVIL STATUS			PROPOSED POSITION	
39	MALE	SINGLE	ALLOCATE PROFESSION IV	

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached example above named individual and found him/her to be physically and medically				
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: ELWIN JAY V. YU, ND, MPH. Chief of Hospital I License No. 098880	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
AGENCY/Affiliation of Licensed Government Physician:				-
Vou Hospitar				
09880	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE O †	of
OFFICIAL DESIGNATION	DATE EXAMINE	D		1

AGENCY / ADDRESS