MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS	1	N	S	T	R	U	C	T	1	0	N	5
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a.	I his medical	certificate s	hould be	accomplish	ed by a	licensed	government	physician.
h	Attach this co	artificate to	original or	anaintment	trancfor	and room	malaymant	

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

Visague State university
11.1914
PROPOSED POSITION
Marciale professor I

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 in F	mination results, personally examined the IT / □UNFIT for employment.
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE

CHRISTELLE VENUS F. CAPUND. MEDICAL OFFICERIII

AGENCY/Affiliation of Licensed Government Physician:

WHER VSU

DITUSSI

Bare Foot FOU M DATE EXAMINED

25

HEIGHT (M)

Stripped 80.1 kgs

WEIGHT (KG)

AGENCY / ADDRESS

BLOOD

TYPE

OFFICIAL DESIGNATION

LICENSE NO.

Medical Officer III

April