

**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:

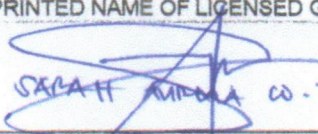
- ☒ Blood Test  
☒ Urinalysis  
☐ Chest X-Ray  
☐ Drug Test  
☐ Psychological Test  
☐ Neuro-Psychiatric Examination (if applicable)

**FOR THE PROPOSED APPOINTEE**

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS
GARRIDO, ROMMEL JR., MADREDITO			
ADDRESS			
Apul. 92, Kibourne St., USU, Baybay City			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
28	M	Single	

**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 found him/her to be physically and medically ☒ FIT / ☐ UNFIT for employment.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
 DR. MICHAELA W. TABADA			
AGENCY/Affiliation of Licensed Government Physician:			
WU INFIRMARY			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
0153151	174	74.5	
OFFICIAL DESIGNATION	DATE EXAMINED		
medical officer III	12-29-21		

BP 120/80