

**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         |
| Custodio, April Jae Gabriel   |        |              | Visayas state University |
| ADDRESS<br>Brgy. Concepcion, Ormoc City                               |        |              |                          |
| AGE   | SEX    | CIVIL STATUS | PROPOSED POSITION        |
| 27  | Female | Married      | Instructor I             |

**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 <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment. |                         |  |               |
| SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  |                         | OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE |               |
| SARAH AURORA W. TABADA, M.D.<br>Medical Officer III<br>License No. 20153107  |                         |  |               |
| AGENCY/Affiliation of Licensed Government Physician:   |                         |  |               |
| LICENSE NO.  | HEIGHT (M)<br>Bare Foot | WEIGHT (KG)<br>Stripped                        | BLOOD<br>TYPE |
|  | 154-                    | 65kg   | 'O'           |
| OFFICIAL DESIGNATION   | DATE EXAMINED           |  |               |
|  | 6-15-22                 |  |               |

class C: Hyperthyroidism [Controlled]