

**INSTRUCTIONS**

1. This medical certificate should be accomplished by a government physician.
2. Attached this certificate to original appointments and reinstatements.

NAME (Last, First, Middle, or if married woman, Maiden Name) <b>CABALLERO JAIME ARANAG</b>		AGENCY ADDRESS <b>VSU</b>	
ADDRESS			
AGE <b>47</b>	SEX <b>M</b>	CIVIL STATUS	PROPOSED POSITION <b>DRIVER</b>
<p align="center"><b>Pre-Employment Medical-Physical Tests</b></p> <p>1. <input checked="" type="checkbox"/> Blood Test                  2. <input checked="" type="checkbox"/> Urinalysis                  3. <input checked="" type="checkbox"/> Chest X-ray                  4. Drug Test                  5. Neuro-Psychiatric Examination (if necessary)</p>			
<p align="center"><b>FOR THE PHYSICIAN</b></p>			
I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be <u>physically and medically fit/unfit</u> for employment - <b>Hypertensive with medication</b>			Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN <b>Mary Christy J. Siquet - Arana</b>		CERTIFICATE NO. <b>11121</b>	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE
OFFICIAL DESIGNATION <b>Medical Officer III</b>		HEIGHT (Barefoot) <b>165 cm</b>	WEIGHT (Stripped) <b>89.8</b> BLOOD TYPE <b>B+, 134/90</b>
AGENCY: <b>VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines</b>		DATE EXAMINED <b>1-11-13</b>	