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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	
Valen:	zona, Mat	rio Asmolo		
Tub-ang, Kelim, Bayleay City Lujte			Vsu	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
67	M	Married	SRA	

FOR THE LICENSED GOVERNMENT PHYSICIAN

1-20.21		20.21	
OFFICIAL DESIGNATION	DATE EXAMINED		
	155 cm	63.7 kg	~A**
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
AGENCY/Affiliation of Licensed Government Physician:			
WEUGA C	PRO	POSED APPOIN	TEE
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE		
above named individual and found him/her to be physically and medically	DFIT! DUNFI	T for employme	nt.
I hereby certify that I have reviewed and evaluated the attached exa	The state of the s	io, porcorrany o	dirimiou une

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