

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

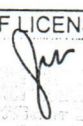
- a. This medical certificate should be accomplished by a licensed government physician.
 b. Attach this certificate to original appointment, transfer and reemployment.
 c. The results of the following pre-employment medical/physical/mental examinations must be attached to this form:

- ☒ 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
Bartolini, Manuel Cuarenta			Registrar's office
ADDRESS			VSU, Bawbaw City, Leyte
Brgy. Gundaluge, Bawbaw City, Leyte			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
57	Male	married	Renewal

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 <u>him</u> /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	
 Medical Officer of Health License No. 21127			
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (in) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	1.66	48.3	B
OFFICIAL DESIGNATION		DATE EXAMINED	
		12-19-17	