

## MEDICAL CERTIFICATE

(For Employment)

### INSTRUCTIONS


- This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- 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           |
| MANIEGO, MARY ROSE MILLERA  |        |              | PhilRootcrops - VSU        |
| ADDRESS   |        |              |                            |
| GABAS, BAYBAY CITY, LEYTE   |        |              |                            |
| AGE   | SEX    | CIVIL STATUS | PROPOSED POSITION          |
| 31  | Female | Single       | Science Research Assistant |

### FOR THE LICENSED GOVERNMENT PHYSICIAN

|   |                         |  |               |
|---|-------------------------|--|---------------|
| <i>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.</i> |                         |  |               |
| SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:   |                         | OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE |               |
| <br>Charlene Yanes F. Capang, M.D.<br>License No. 156881   |                         |  |               |
| AGENCY/Affiliation of Licensed Government Physician:  |                         |  |               |
| VSU HOSPITAL  |                         |  |               |
| LICENSE NO.   | HEIGHT (M)<br>Bare Foot | WEIGHT (KG)<br>Stripped                        | BLOOD<br>TYPE |
| 156881  | 157                     | 49   | A             |
| OFFICIAL DESIGNATION  |                         | DATE EXAMINED                                  |               |
| Medical Officer III   |                         | 1-9-15   |               |

bp  
10/10