## MEDICAL CERTIFICATE

(For Employment)

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- 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 Nam	ne, First Name, Name Exter	nsion (if any) and Middle Name)	AGENCY / ADDRESS		
CASINILLO	, EMILY T.		VSV ,		
ADDRESS			Visca, Baybay City		
Broy. Pat	ag Baybay	City Legte	lughe		
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
28	F	Marrie d	Instructor III		

## FOR THE LICENSED GOVERNMENT PHYSICIAN

	(	1-18-19			
OFFICIAL DESIGNATION	DATE EXAMINED				
	141	49	Ot		
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE		
AGENCY/Affiliation of Licensed Government Physician:					
MERRY CHRISTLT, SUPNET-GUINOCOR, M.D.  Medical Officer III  License No. 111828	PROPOSED APPOINTEE				
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE				
I hereby certify that I have reviewed and evaluated the attached exabove named individual and found him/her to be physically and medically.					