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 Name,	First Name, Name Extension (AGENCY / ADDRESS	
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ADĎRESS			The American Control of the Control
PORON.	Gaudalupe ,	Baylow City, Legle	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
29	Female	Single	Instructor 11

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached example above named individual and found him/her to be physically and medically.				
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
AGENCY/Affiliation of Licensed Government Physician:				
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LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD	
11/820	1:51	46	At	
OFFICIAL DESIGNATION	DATE EXAMINED			
Madical Officer III	05/02/24			

(00/4) (00/4)