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 Na | me, First Name, Name Ext | ension (if any) and Middle Name) | AGENCY / ADDRESS | | |
|---------------|--------------------------|----------------------------------|--|--|--|
| | M 020 | QN WINN | | | |
| ADDRESS | | | Visayas State University - Main Campus, Baybay Cots, legt | | |
| AGE | SEX | CIVIL STATUS | PROPOSED POSITION | | |
| 49 | + | Married | Prof. 111 | | |

FOR THE LICENSED GOVERNMENT PHYSICIAN

| I hereby certify that I have reviewed and evaluated the attached eabove named individual and found him/her to be physically and medically the state of the physical process. | | | |
|--|--|-------------------------|---------------|
| SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: | OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE | | |
| AGENCY/Affiliation of Licensed Government Physician: | | | |
| LICENSE NO. | HEIGHT (M) Bare Foot | WEIGHT (KG) Stripped | BLOOD TYPE |
| 111 8 382 | 1.58 M | 46 Kg | 0 |
| OFFICIAL DESIGNATION . | DATE EXAMINED | | |
| | Soyd. 28, 2022 | | |