## 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
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Urinalysis

☐ Urinalysis☐ Chest X-R☐ Drug Test☐ Chest X-Ray

Psychological Test
Neuro-Psychiatric Examination (if applicable)

## FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)		ion (if any) and Middle Name)	AGENCY / ADDRESS		
YERGIS, VALERIE YAMON			DEPARTMENT OF AGRICULTURAL		
POBLACION ZONE 16, BAYIBAY CITY, LEYTE		CITY LEYTE	STATE UNIVERSITY VISCA, 13 AUDAY CITY, LEYTÉ		
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
26 y.o.	PEMALE	MAKKIED	ADMIN. AIDE N		

## FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached ex above named individual and found him/her to be physically and medically			
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  Elwin Jay V. Yu, M.D.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
Chief of Hospital License No. 098800	Animia etni (?) on Fe 80 y		
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD
	155 cm	58.7kg	B+
OFFICIAL DESIGNATION	L DESIGNATION DATE EXAMINED		