## MEDICAL CERTIFICATE

(For Employment)

		INSTRUCTION	S
	b. Attach this certific c. The results of the must be attached to Blood Te Urinalysi Crest X- Drug Tes Psychological	sst s Ray	and reemployment.  ohysical/psychological
	FC	R THE PROPOSED A	PPOINTEE
NAME (Last Name, F	irst Name, Name Extension (	AGENCY / ADDRESS	
ALBA , I	DONEEN B.		VsV
ADDRESS BRUY. GU	ADALUPE, BAYBI	AY CITY , LEYTE	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
34	Female	Single	Admin- Aide VI

## FOR THE LICENSED GOVERNMENT PHYSICIAN

MERRY (HRIST I SUPNET GUI VOR M.D.  Medical Officer III  License No. 111828  AGENCY/Affiliation of Licensed Government Physician:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE Ang	
OFFICIAL DESIGNATION	DATE EXAMINED			

130-120