## INSTRUCTIONS

Attached this certificate to origina	accomplished by a go al appointments and re				
NAME (Last, First, Middle, or if married woman, Ma	AGENCY ADDRESS				
TOLIBAS, MICHELLE CALDA		VISAMAS STATE UNIVERSITY.			
DUPLEX E-2 VISAMS STATE UNITED BOYLEYTE	LEASITY, VISCA	COLLE	6E OF	NURSING	
AGE SEX F	CIVIL STATUS	PROPOSED POSITION  A \$51577407 PROFESSOR 3			
Pre-Employn	MATHUED   nent Medical-Physical		1311/01 1	TWP COSUL -	
	niatric Examination (If	f necessary,	)		
I HEREBY CERITIFY that I have personal individual and found her/him to be physicall employment				1	
	CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
PRINTED NAME/SIGNATURE OF PHYSICIAN  MERRY (HRIST'L T. SUPNET GUINOCOR, MD.  Medical Officer III  License No. 111828		PROPOSED	APPOINTEE		
		HEIGHT	WEIGHT	BLOOD TYPE	Вр
MERRY CHRIST'L T. SUPNET GUINOCOR, M.D.,  Medical Officer III  License No. 111828				BLOOD TYPE	Bp