## 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

AGE 64	SEX Female	CIVIL STATUS  Married	PROPOSED POSITION  Jevience Kesearch Assist.		
ADDRESS Zone	4 Barangay	10012( 2 ,000			
MALAS	SAGA EDRI	ALIN M.	Nenc-V , USU		
NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS		

## 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:  Christelle Venus F. Capuna (1917)  Lic. No. 0156881	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
AGENCY/Affiliation of Licensed Government Physician:				
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
012088	142	45-6	0	
OFFICIAL DESIGNATION	DATE EXAMINED			
Medical Office W	1-22-25			

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