

<b>INSTRUCTIONS</b>			
1. This medical certificate should be accomplished by a government physician. 2. Attached this certificate to original appointments and reinstatements.			
NAME ( Last, First, Middle, or if married woman, Maiden Name) <i>Salas Rosario Algodon</i>			AGENCY ADDRESS <i>VSU</i>
ADDRESS <i>36 Kilbourne St. VSU</i>			
AGE <i>53</i>	SEX <i>F</i>	CIVIL STATUS <i>M</i>	PROPOSED POSITION <i>Asso Prof, V</i>
Pre-Employment Medical-Physical Tests			
1. <input checked="" type="checkbox"/> Blood Test 2. <input checked="" type="checkbox"/> Urinalysis 3. <input checked="" type="checkbox"/> Chest X-ray 4. <input checked="" type="checkbox"/> Drug Test 5. Neuro-Psychiatric Examination (if necessary)			
<b>FOR THE PHYSICIAN</b>			
I HEREBY CERITIFY that I have personally examined the above-named individual and found her/him to be physically and medically fit/unfit for employment			Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN <i>MERRY CHRIST'L T. SUPNET-GUINOCOR, M.D.</i> Medical Officer III License No. 111828		CERTIFICATE NO. <i>11763</i>	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE
OFFICIAL DESIGNATION		HEIGHT (Barefoot) <i>152 cm</i>	WEIGHT (Stripped) <i>74.7 kg</i>
AGENCY:  VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines		BLOOD TYPE  DATE EXAMINED  <i>1-23-17</i>	

Bp:  
*110/70* mmHg