CSC Form No. 211 (Revised August 1998)
MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS						
 This medical certificate should be accomplished by a government physician. Attached this certificate to original appointments and reinstatements. 						
NAME (Last, First, Middle, or if married woman, Maiden Name)				AGENCY ADDRESS		
QUIMID JUSTIND MARUDO			VSU			
ADDRESS AC VSU						
AGE	SEX	CIVIL	PROPOSED POSITION			
I7	14	STATUS	PROFESSOR V			
Pre-Employment Medical-Physical Tests						
2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If necessary)						
FOR THE PHYSICIAN						
I HEREBY CERITIFY that I have personally examined the above individual and found her/him to be physically and medically fit/unfiemployment						
PRINTED NAME/SIGNATURE OF PHYSICIAN CERTIFICATE NO. MERRY (HRISTLI, SUPNET-GUINOCOR, M.D. Medical Officer III License No. 111828			OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
OFFICIAL DESIGNATION			HEIGHT	WEIGHT	BLOOD TYPE	
			(Basefoot)	(Stripped)	0	
			1 Bern 17.3 Kg			
AGENCY: VSU HOSPITAL			DATE EXAM	INED		
Visual Vi				1-30-13		
Visca, Baybay, Leyte, Philippines				1 10-13		