

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- 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

NAME (Last Name, First Name, Name Extension (if any) and Middle Name) Galvez Karl John A.			AGENCY / ADDRESS Department of Economics
ADDRESS USU			
AGE 28	SEX M	CIVIL STATUS Single	PROPOSED POSITION Instructor I

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found <u>him</u> /her to be physically and medically <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: GERRY CHRISTL MEDICAL OFFICER III LICENSE NO. 111828		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician: USU Hospital			
LICENSE NO. 111828	HEIGHT (M) Bare Foot 171	WEIGHT (KG) Stripped 88	BLOOD TYPE B ⁺
OFFICIAL DESIGNATION Medical Officer III		DATE EXAMINED 1-29-24	

DP
12/1/20