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 Extensi	AGENCY / ADDRESS	
Mandia Joyce		CII	
ADDRESS			
13	gu- Binulho	Javevir Leyte	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
24	P	Single	Permanent

FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
Christelle Venus F, Capuno M, D, Lic. No. 0156881 AGENCY/Affiliation of Licensed Government Physician:			
USh WHEN			
ICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD
015481	457	47-5	-
DFFICIAL DESIGNATION	DATE EXAMINED		
Medical Office III	9-7-23		