MEDICAL CERTIFICATE

(For Employment)

INSTRUCTION	18
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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

	e. First Name, Name Extension	VIVING VIDTE VNIVERS	
ADDRESS 379-13	mil OUEZON	IT ZONE 18, BODD	es city Lane
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
27	FEMOVE	omere	INTELLOW 1-

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluate above named individual and found him/her-to be physical				
SIGNATURE over PRINTED NAME OF LICENSED GOVERNME W Medical Officer III License No. 111828 AGENCY/Affiliation of Licensed Government Physician:	Medical Officer III License No. 111828			OUT THE
LICENSE NO		HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD
ICENSE NO		The state of the s		