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)			AGENCY / ADDRESS	
ABIT	, MA. GWEN	You, Baybay City,		
BROY.	MARCOS, BA	YBAY CITY, LEYTE	Ceyte PROPOSED POSITION	
AGE	SEX	CIVIL STATUS		
31	temale.	Sivole	Assitant Prof. IV	

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached above named individual and found him/her to be physically and medically			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
CHM STEWE YENUS F- CHRIND, MD AGENCY/Affiliation of Licensed Government Physician: VSu Marpina			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD
0154881	1 -52 m	6745	B †
OFFICIAL DESIGNATION	DATE EXAMINED		
Wo W	8-11-202 I		