CIVIL SERVICE COMMISSION

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		
PIDO NESTOR LEDNING					
ADDRESS					
ZONE 17, BA					
AGE	SEX	CIVIL	PROPOSED POSITION		
59	MALE	STATUS	PROFESSOR V		
Pre-Employment Medical-Physical Tests					
1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If necessary)					
FOR THE PHYSICIAN					
I HEDEDY CEDITIEV that I have remarkly and the characteristics of th			100 0		
I HEREBY CERITIFY that I have personally examined the above individual and found her/him to be physically and medically fit/unfit					
employment					
HACO M MAJCONM					
PRINTED NAME/SIGNATURE OF PHYSICIAN CERTIFICATE NO. INDIVIDUAL CONTROL III License No. 111823			OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
OFFICIAL DESIGNATION			HEIGHT	WEIGHT	BLOOD TYPE
*			(Barefoot)	(Stripped)	A+
			138 cm 12-8 Fg		
AGENCY: VSU HOSPITAL			DATE EXAMINED		
Visayas State University			\ 10.35		
Visca, Baybay, Leyte, Philippines			1-37-17		