CSC Form No. 211 (Revised August 1998) MEDICAL CERTIFICATE For Employment

This medical certificate should be Attached this certificate to origin					
NAME (Last, First, Middle, or if marned woman, Maiden Name) Gabrillo, Christina A		AGENCY ADDRESS			
ADDRESS Dev Com Pegrof., V AGE SEX	/sm	V	M		
48 CIVIL PROPOSED POSITION STATUS Pre-Employment Medical Physical Tests				S	
Pre-Employ	ment Medical-Physica	al Tests		•	
1 Blood Test 2 Urinalysis 3 Chest X-ray 4 Drug Test 5 Neuro-Psyc	hiatric Examination (//	f necessary)		
FO	R THE PHYSICIAN				
I HEREBY CERITIFY that I have personally examined the above individual and found her/him to be physically and medically fit/unfi employment ONUMA ON TEMA			e-named Affix Documentary it for Stamp		
PRINTED NAME/SIGNATURE OF PHYSICIAN	CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
OFFICIAL DESIGNATION		HEIGHT	WEIGHT	BLOOD TYPE	Bp.
réside officer III		(Barefoot) 152 CM	(Striffed) 93 Kg	0	120
AGENCY: VSU HOSPITAL.		DATE EXAM	INED		
Visayas State University Visca, Baybay, Leyte, Philippines		3-21-17			