

INSTRUCTIONS

- 1. This medical certificate should be accomplished by a government physician.
- 2. Attached this certificate to original appointments and reinstatements.

NAME (Last, First, Middle, or if married woman, Maiden Name) <i>MONTANES, FERNANDO NUÑEZ</i>			AGENCY ADDRESS <i>VSU</i>		
ADDRESS <i>USCU</i>					
AGE <i>50</i>	SEX <i>M</i>	CIVIL STATUS <i>M</i>	PROPOSED POSITION <i>APM AIDE II</i>		
Pre-Employment Medical-Physical Tests					
<div>1. Blood Test</div> <div>2. Urinalysis</div> <div>3. Chest X-ray</div> <div>4. Drug Test</div> <div>5. Neuro-Psychiatric Examination (If necessary)</div> <div><i>bp - 130/70 mmHg</i></div> <div><i>1. Muc to Emps file</i></div>					
FOR THE PHYSICIAN					
I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be physically and medically fit/unfit for employment					Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN <i>JOSEPHINE O. ZAFICO, M.D.</i>		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
OFFICIAL DESIGNATION <i>MEDICAL OFFICER III</i> <i>LIC. # 075699</i>			HEIGHT (Barefoot) <i>178 cm</i>	WEIGHT (Stripped) <i>74.8 kg</i>	BLOOD TYPE <i>A</i>
AGENCY: <i>VSU HOSPITAL</i> <i>Visayas State University</i> <i>Visca, Baybay, Leyte, Philippines</i>			DATE EXAMINED <i>7/16/13</i>		