CSG FORM NO. 211 (Revised August 1998) MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

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

FOR PROPOSED APPOINTEE

NAME (Last, First, Middle, or if married woman, Maiden Name)	AGENCY/ADDRESS
POLIQUIT ROSALINA PIALIMAS	Visca, Baylay City, Lyte
ADDRESS	PROPOSED POSITION
Guadaliye Baybay City, Leyte AGE SEX CIVIL STATUS 51 yrs old Female Named	Associate Profesor III

Pre-Employment Medical-Physical Tests

- 1. Blood test
- 2. Urinalysis
- 3. Chest X-ray
- 4. Drug Test
- 5. Neuro-Psychiatric Examination (if necessary)

NOTE: ALL RESULTS OF EXAMINATIONS MUST BE ATTACHED TO THIS FORM.

FOR THE PHYSICIAN					
I hereby certify that I have personally examined individual and found her/him, to be physically for employment			Do	ocumentary	/ Stamp
PRINTED NAME / SIGNATURE OF PHYSICIAN	CERTIFICATE NUMBER	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE HEIGHT WEIGHT BLOOD			
Lidence No. JWS14 OFFICIAL DESIGNATION M		(Bare fee	t)	(Stripped)	type 10 + 11
AGENCY (#1) - V1/2		DATE EXAMINED			