MEDICAL CERTIFICATE

(For Employment)

ı	NI	C	T		11	CT	- 1	0	NI	C
ı	IN	3	- 1	Γ	U		- 1	U	IN	0

- 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 Extens	AGENCY / ADDRESS		
AJILOM,	VINCENT	VICA, BAYBAY		
J.P. LA	UREL ST.	BAY DAY CITY, LETTE	PROPOSED POSITION	
36	M	MARRIED	ADMIN. AIDE 1	

I hereby certify that I have reviewed and evaluated the attached example 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
AGENCY/Affiliation of Licensed Government Physician:	

USM Hospital

OUTESA

Medical Officer M

HEIGHT (M) Bare Foot

WEIGHT (KG) Stripped

BLOOD TYPE

OFFICIAL DESIGNATION

LICENSE NO.

DATE EXAMINED

14 January 2025