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

For Employment

INSTRUCTIONS						
<ol> <li>This medical certificate should be accomplished by a government physician.</li> <li>Attached this certificate to original appointments and reinstatements.</li> </ol>						
NAME (Last, First, Middle, or if married woman, Maiden Name)			AGENCY ADDRESS			
MARAWGUIT DEEJAY SABILLE			VSU, BAYBAY LEYTE			
ADDRESS						
GIADALUPE BAYBAY LEYTE						
AGE	SEX	CIVIL	PROPOSED POSITION			
2.8	FEMALE	SINGLE	INSTRUCTOR 11			
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 HEREBY CERITIFY that I have personally examined the above-na				165 D		
individual and found her/him to be physically and medically fit/unfit employment			t for	Affix Documentary Stamp		
PRINTED NAME/SIGNATURE OF PHYSICIAN  CERTIFICATE NO.  MENY (HISTI, SANDERS NO. 111828)  CONTROL OF PHYSICIAN  CERTIFICATE NO.			OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
OFFICIAL DESIGNATION			HEIGHT	WEIGHT	BLOOD TYPE	
			(Barefoot)	(Stripped)	1,90	
AGENCY:			DATE EXAMINED			
VSU HOSPITAL Visayas State University			T			
Visca, Baybay, Leyte, Philippines			5-20-17			