MEDICAL CERTIFICATE

(For Employment)

INST	TRUCTIONS
 Attach this certificate to original apport 	oloyment medical/physical/psychological
FOR THE PRO	OPOSED APPOINTEE
NAME (Last Name, First Name, Name Extension (if any) and Middle Name BUSTAMANTE, ROGER ROQUE EBO ADDRESS	
Mangyan, Sibonga, Cebu AGE SEX CIVIL STATUS	PROPOSED POSITION
26 Male Single	Instructor 1
I hereby certify that I have reviewed and evaluate above named individual and found him/her to be physiosistics over PRINTED NAME OF LICENSED GOVERNM	
Elwin Jay V. Yu, M.D. Chief of Hospital License No. 098800 AGENCY/Affiliation of Licensed Government Physician:	PROPOSED APPOINTEE
ICENSE NO.	HEIGHT (M) WEIGHT (KG) BLOOD TYPE 177 CM 92.9 Kg O+
OFFICIAL DESIGNATION	01. 01. 2020