

**MEDICAL CERTIFICATE**  
(For Employment)

**INSTRUCTIONS**

- 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 Extension (if any) and Middle Name) <i>Florus Maria Zaida X.</i>			AGENCY / ADDRESS
ADDRESS <i>M.H. del Pilar St. Baybay City</i>			
AGE <i>55</i>	SEX <i>F</i>	CIVIL STATUS <i>S</i>	PROPOSED POSITION

**FOR THE LICENSED GOVERNMENT PHYSICIAN**

<i>I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.</i>			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: <i>[Signature]</i> <b>Elwin Jay V. Yu, M.D.</b> Chief of Hospital License No. 092800		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE <i>[Signature]</i>	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot <i>163</i>	WEIGHT (KG) Stripped <i>70</i>	BLOOD TYPE <i>O</i>
OFFICIAL DESIGNATION <i>CMT</i>	DATE EXAMINED <i>12-19-22</i>		

DP  
12/19/22