

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

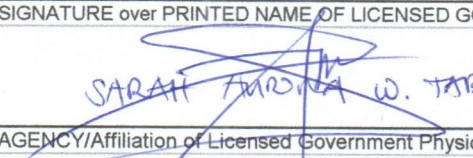
- This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- The results of the following pre-employment medical/physical/**psychological** must be attached to this form:

- ☒ 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)			AGENCY / ADDRESS
OAGANDE, LOREME, SILMARO			DEPARTMENT OF AGRONOMY, WSU
ADDRESS DAHLIA DORMITORY, WSU			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
27	F	SINGLE	INSTRUCTOR I

FOR THE LICENSED GOVERNMENT PHYSICIAN

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.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
 SARAH ARONSON W. TABADA			
AGENCY/Affiliation of Licensed Government Physician: WSU Infirmery			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
0153151	152	60.5	A+
OFFICIAL DESIGNATION	DATE EXAMINED		
Medical Officer III	9/29/21		

NP 100
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