MEDICAL CERTIFICATE

(For Employment)

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- 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:

D	Blood	Test
	1 leinal	mim

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		
Valencerina, Susan moreno			Accounting Department		
ADDRESS			J P MISH		
Zone 1 Baybay city, Leyte			150, Mistar garbar Cir		
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
62	F	M	Casual		

FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: CHRISTELLE VENUS F. CAPPNO, M.D.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
MEDICAL OFFICE III LICENSE NO. 0156881	and the same of th			
AGENCY/Affiliation of Licensed Government Physician:				
USU Hospital				
LICENSE NO.	HEIGHT (M)	WEIGHT (KG)	BLOOD	
015081	Bare Foot	Stripped	TYPE	
	1.48 M	US 14	A	
OFFICIAL DESIGNATION	DATE EXAMINE	D		
Medical Oppicer M	9 Jan	um 20	y	