## MEDICAL CERTIFICATE

(For Employment)

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)			AGENCY / ADDRESS
EMHAC	E IVY CAP	brgy. Pangasuggy	
ADDRESS			
Apt # 63	Killbourne Drivi Bay6	gam barbay city, Leyte	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
44	Female	Married	xssociate Prof. V

## FOR THE LICENSED GOVERNMENT PHYSICIAN

above named individual and found him/her to be physically and medically to SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
M M M M M M M M M M M M M M M M M M M			
LICENSE NO.	HEIGHT (M)	WEIGHT (KG)	BLOOD
111828	I Go M	Stripped 52 kg	TYPE
OFFICIAL DESIGNATION	DATE EXAMINED		
medical Officer I	9-27-2,		