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)			AGENCY / ADDRESS		
Jan Jan	yme, Jene	fer B			
ADDRESS		J			
4	Bray. Hibana	man, Baybay City	1		
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
		2			

FOR THE LICENSED GOVERNMENT PHYSICIAN

OFFICIAL DESIGNATION	DATE EXAMINED Plen			us us file
·	1.615	6258	0	_ lw}
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	BY
AGENCY/Affiliation of Licelet Payer, PysiciaM.D. Chief of Hospital License No. 098800				
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			73
I hereby certify that I have reviewed and evaluated the attached exar above named individual and found him/her to be physically and medically				0)