

**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) <b>OCOP, FELIX LLOVE</b>			AGENCY / ADDRESS <b>NAAC</b>
ADDRESS <b>Punoll 4, Carmona, Bayamón City</b>			
AGE <b>57</b>	SEX <b>M</b>	CIVIL STATUS <b>S</b>	PROPOSED POSITION <b>SRA</b>

**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 ☒ **FIT** / ☐ **UNFIT** for employment.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  <b>Christofe Yonius F. Capuno, M.D.</b> License No. 156881		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician: <b>RSU Hospital</b>			
LICENSE NO. <b>156881</b>	HEIGHT (M) Bare Foot <b>157.4</b>	WEIGHT (KG) Stripped <b>62</b>	BLOOD TYPE <b>O</b>
OFFICIAL DESIGNATION <b>Medical Officer M</b>	DATE EXAMINED <b>1-7-25</b>		

BD  
2025