

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
MAMOLO, LEO ALDAMIA			VSU, VISCA, BAYBAY CITY, LEYTE
ADDRESS			
VSU, VISCA, BAYBAY CITY, LEYTE			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
27	MALE	SINGLE	ASSISTANT PROFESSOR I

FOR THE LICENSED GOVERNMENT PHYSICIAN

<i>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.</i>			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
MERRY CHRIST'L T. SUPNET-GUINOCOR, M.D. Medical Officer III License No. 111828			
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	172	63.4	'B'
OFFICIAL DESIGNATION	DATE EXAMINED		
	11-14-19		

DEPARTMENT OF HEALTH
DIVINE RAYS DIAGNOSTIC AND MEDICAL CENTER
OSMENA ST., SOGOD, SOUTHERN LEYTE

Phone Number 09179069427

DRUG TEST REPORTQO970792
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CCF No: 201911140002
Name: MAMOLO, LEO ALDAMIA
Birthdate: 08/07/1992 Age: 27

Gender: M

Transaction Date Time: 11/14/2019 10:04:00AM
Report Date Time: 11/14/2019 11:41:42AM

Test Method TEST KIT**Purpose**

Random - Government Employee

Requesting Parties

VISAYAS STATE UNIVERSITY

Result

Drug/Metabolite	Result	Remarks
METHAMPHETAMINE	NEGATIVE	PASSED
TETRAHYDROCANNABINOL	NEGATIVE	PASSED

Test Conducted By

76 MARIA LUZ MARGAN MARCIAL COSIO

Analyst

Approved By

DR JOSE TRANI SANTIAGO

Head of Laboratory

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Valid Within 12 Month/s from Transaction Date*This is a DOH-DDB IDTOMIS generated report*

X-RAY* ULTRASOUND* ECG* LABORATORY* DRUG TEST* MEDICAL CLINIC* MEDICAL MOBILE SERVICE