MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/mental examinations must be attached to this form:

D	Blood Test
P	Urinalysis
	Chest X-Ray
	Drug Test
	Psychological Test
	Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name	First Name. Name Extens	AGENCY / ADDRESS	
MANINA	GO, LYNDOI	14K-Visayou State University	
ADDRESS 406 Pasil	Bilwang, Isa		
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
34	Male	Single	Instructor

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached ex above named individual and found <u>him/her</u> to be physically and medically			
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: MERRY CHRISTLE, SUPNET-GOVERNMENT PHYSICIAN: MERRY CHRISTLE, SUPNET-GOVERNMENT PHYSICIAN: AGENCY/Affiliation of Cloudsed Government Physician.	OTHER IN	FORMATION AE POSED APPOIN	BOUT THE
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
OFFICIAL DESIGNATION	DATE EXAMINED		