CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

 This medical certificate should be according. Attached this certificate to original app 	mplished by a go ointments and re	einstatement	iysiciaii. S.			
				ECC	-	
NAME (Last, First, Middle, or if married woman, Maiden Name)			AGENCY ADDRESS			
Bartolini, Manuel Cuaventa		News office V&U, Visca, Buybay City, Lewste				
city, Leyte	, Burgers	VEU, L	liscn, 1 Leuste	Buybey		
AGE SEX MALL	CIVIL STATUS		OSED POS	SITION		
Pre-Employment	Medical-Physica	al Tests				
 Blood Test Urinalysis Chest X-ray Drug Test Neuro-Psychiatric 	C Examination (pb			
FOR TH	E PHYSICIAN					
I HEREBY CERITIFY that I have personally examined the above-individual and found her/him to be physically and medically fit/unfit employment			named Affix Documentary t for Stamp			
PRINTED NAME/SIGNATURE OF PHYSICIAN	CERTIFICATE NO.	OTHER INFO	RMATION A	BOUT THE	1	
h /	PROPOSED APPOINTEE					
SUSEPHINE U. ZAFICO.M D					Control of the Contro	
OFFICIAL DESIGNAL OFFICER		HEIGHT	WEIGHT	BLOOD TYPE	00-)	
LIC. # 075699		(Barefoot)	(Striffed)	no	1	
AGENCY:		DATE EXAM	/	<u> </u>	-	
VSU HOSPITAL	*					
Visayas State University Visca, Baybay, Leyte, Philippines		2/4/15				