

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) BOLECHE, JOANAH LOUIELA ORAPA			AGENCY / ADDRESS VISAYAS STATE UNIVERSITY
ADDRESS BLK. MASUG, DDMBDM CITY, LEYTE			
AGE 29	SEX F	CIVIL STATUS SINGLE	PROPOSED POSITION ADMIN AIDE III

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: ELWIN MAY V. YU, MD, MPH. Chief of Hospital I License No. 098800		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE 	
AGENCY/Affiliation of Licensed Government Physician: VSU Hospital			
LICENSE NO. 098800	HEIGHT (M) Bare Foot 1.51	WEIGHT (KG) Stripped 53	BLOOD TYPE A+
OFFICIAL DESIGNATION Chief of Hospital	DATE EXAMINED 7-7-2025		

ml 110
70

(Neuro Psychiatric Test)
Ormoc City (053-832-3123)

Date: 07/5/2025


PURPOSE OF EXAMINATION: EMPLOYMENT
NAME: BOLECHE, JOANAH LOUIELA O. **Age:** 29 **SEX:** F **C.S:** SINGLE
HOME ADDRESS: BAYBAY CITY
EDUCATIONAL ATTAINMENT: COLLEGE GRADUATE
PURPOSE/ DATE OF PREVIOUS NP EXAMINATION _____

FACTORS	ABSENT	LOW	AVERAGE	HIGH
INTELLIGENCE				
1. Capacity for Abstraction			X	
2. Organizational Capacity			X	
3. Learning Activities			X	
4. Alertness			X	
MANNER OF COMMUNICATION PREFERRED				
1. Verbal			X	
2. Non-Verbal			X	
EMOTIONAL STABILITY				
1. Coping with Stress			X	
2. Control of Aggressive hostile impulse			X	
3. Free from neuro tendencies			X	
VALUES				
1. Positive			X	
2. Negative			X	
EDUCATION: Relevant Training			X	
EXPERIENCE: Security Training				
Handling Guns				
Others:				
MOTIVATION: Security Reasons			X	
Self-esteem / confidence				
Others:				
SOCIAL ADAPTABILITY:				
1. With people in general			X	
2. With peers			X	
3. With supervisor			X	
4. With subordinates			X	
WORK ATTITUDES:				
1. Responsibility				X
2. Loyalty				X
3. Perseverance				X
4. Initiative				X

REMARKS
 Psychological: No gross psychological abnormality
 Negative psychiatric disorder.

RECOMMENDATION
FOR FIREARMS LICENCE
☐ Recommended for possession
☐ Recommended permit to carry
☐ Needs training on handling to carry
☐ Not recommended

FOR SECURITY GUARDS/OTHERS
☒ Recommended with
☐ Recommended risk
☐ Needs training
☐ Not recommended


LYN L. VERONA, MD
 Psychiatrist / NP Screener
 Accreditation / PRC No. **80515**