CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

	e, or if married woman, Maiden		AGE	NCY ADD	RESS	
ADDRESS	HARLIE MARK F	LANGET				
ADDINESS						
AGE	SEX	CIVIL	PROF	POSED PO	SITION	1
31	MALE	STATUS	DEIV	er - I		
	Pre-Employment	t Medical-Physica	al Tests			
	2. Urinalysis 3. Chest X-ray 4. Drug Test		mon	flor		
		ic Examination (II	f necessary,)		
		IE PHYSICIAN examined the abov	e-named	Affix D	Documentary Stamp	
employment PRINTED NAME/SIGNATUR JOSEPHINE	FOR THE TY that I have personally er/him to be physically and RE OF PHYSICIAN	IE PHYSICIAN examined the abov	e-named fit for	Affix D	Stamp	
ndividual and found he employment PRINTED NAME/SIGNATUR JOSEPHINE DEFICIAL DESIGNATION CA	FOR THE TY that I have personally er/him to be physically and RE OF PHYSICIAN	E PHYSICIAN examined the above and medically fit/unit	e-named fit for	Affix D	Stamp	mo