MEDICAL CERTIFICATE (For Employment)

1	N	S	T	R	U	C	T	1	0	N	S

- 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

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)

- ☐ Psychological Test
- Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

POIL 1	philip caesan	USU-BAYBAY			
ADDRESS		OSM (Sillis 1)			
APT.50,1	knoomme dune,	LCN , BAIBAY			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
35	MAVE	MANNED	ACCISTANT PROTECON 1		
	FOR THE	E LICENSED GOVERNI	MENT PHYSICIAN		

above named individual and found him/her to be physically and medically	
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE
MERRY CHRIST'L I. SUPNET AUNOCOR, M.D.	
AGENCY/Affiliation of Licensed Government Physician:	

AGENCY/Affiliation of Licensed Government Physician:	
	na terr et telle Albanda pare

AGENCY / ADDRESS

LICENSE NO.	HEIGHT (M) WEIGHT (KG) BLOOD
	Bare Foot Stripped TYPE
	1,66m 85.6 kg Ot
OFFICIAL DESIGNATION	DATE EXAMINED
	C (07