

## MEDICAL CERTIFICATE

(For Employment)

### INSTRUCTIONS


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

### FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name) <b>CANETE, QUIMSON RODRIGUEZ</b>			AGENCY / ADDRESS <b>VSU - Department of Agronomy</b>		
ADDRESS <b>PUROK 1 STA. CRUZ, BAYBAY CITY LETE</b>					
AGE <b>32</b>	SEX <b>MALE</b>	CIVIL STATUS <b>SINGLE</b>	PROPOSED POSITION <b>INSTRUCTOR</b>		

### FOR THE LICENSED GOVERNMENT PHYSICIAN

<p><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></p>					
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  <div style="text-align: center;">   <b>Christelle Venus F. Capuno, M.D.</b>  <b>Lic. No. 0156881</b> </div>			OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:  <b>VSU Hospital</b>					
LICENSE NO. <b>0156881</b>					
OFFICIAL DESIGNATION <b>Medical Officer III</b>			HEIGHT (M) Bare Foot <b>176-1</b>	WEIGHT (KG) Stripped <b>92</b>	BLOOD TYPE <b>O</b>
			DATE EXAMINED <b>9-23-24</b>		

DP 120/60