MEDICAL CERTIFICATE

(For Employment)

I	N	S	T	R	U	CT	TI	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
Psychological Test
Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name, Fin	rst Name, Name Extension (if	AGENCY / ADDRESS		
BIACON AGE	W/ 17 F 7	,		
36	MALE	CIVIL STATUS THATFIED	PROPOSED POSITION SECURITY GUARD	

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exabove named individual and found him/her to be physically and medically	xamination resul	ts, personally for employme	examined the	
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: MERRY CHRISTLT, SUPPLY GUILDOOR, M.D. Medical Officer III License No. 111828	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
AGENCY/Affiliation of Licensed Government Physician:				
OFFICIAL DESIGNATION	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped 73:5kg	BLOOD TYPE	
OFFICIAL DESIGNATION	DATE EXAMINED			