CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

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NAME (Last, First, Middle, or			AGE	NCY ADDR	RESS
Luna, Me	riam Martinez		VSU, B	aybay (Cifu,
Brgy, Burge	Baybay, City	Leyse	VSU, B Leyte		3
AGE 42	SEX Female	CIVIL STATUS Married	PROP	OSED PO	SITION
	Pre-Employment I		al Tests		
	1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test				
	5. Neuro-Psychiatric	Examination (/	r necessary)		
		E PHYSICIAN	r necessary)		
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employment PRINTED NAME/SIGNATURE OF	that I have personally exhim to be physically and OF-PHYSICIAN YU. M.D. FICER IV/ HOSPITAL	E PHYSICIAN xamined the above the a	re-named fit for	Affix D	Stamp