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

Prinalysis

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)			AGENCY / ADDRESS	
Gumba	Bertulpo	M		
ADDRESS			NILLO VICIA	
Brezu. Guadalupe, Boybay City, Leyle			NHOC, VSY	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
2 62	M	M	Lab. Tech. T	

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached ex above named individual and found him/her to be physically and medically	xamination result □FIT / □UNFIT	s, personally e for employmen	examined the
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: (hristelle Venus F. Capuno, M.D. Lic. No. 0156881	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician: What was a second control of the control o	500.00		
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
OFFICIAL DESIGNATION	DATE EXAMINED		
Medical Officer III	Deams 4 5, wor		