

## 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>ROSAL, M.A. SHERUTA SERVITOR</b>			AGENCY / ADDRESS <b>Department of Biological Sciences (DBS), VSA, Baybay City, Leyte</b>
ADDRESS <b>#-E MARINI ST, ORANGE CITY.</b>			
AGE <b>22</b>	SEX <b>F</b>	CIVIL STATUS <b>SINGLE</b>	PROPOSED POSITION <b>SUBSTITUTE INSTRUCTOR</b>

## FOR THE LICENSED GOVERNMENT PHYSICIAN

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.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: <b>MERRY CHRISTL T. SUPNET-OTINOCOR, M.D.</b> Medical Officer III License No. 111828		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot <b>156</b>	WEIGHT (KG) Stripped <b>43</b>	BLOOD TYPE <b>O+</b>
OFFICIAL DESIGNATION	DATE EXAMINED <b>8-24-2020</b>		

BP: 100/70 mmHg