MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

THO THOU THOU
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/mental examinations
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)			AGENCY / ADDRESS	
Bantay,	Ayrton John,	Valen zuela	VSU / Bay bay City,	
ADDRESS		Leute		
Brgy. Pa	tay, Baybay	City, Leyte	3970	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
24	Male	Sing le	Instructor 1	
		,		

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 -	amination result □FIT / □ UNFI	s, personally examined the r for employment.	
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
Medical Officer III License No. 111828			
AGENCY/Affiliation of Licensed Government Physician:	mar and appears		
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) BLOOD Stripped TYPE	
	84cm	118.8kg" Oto	
OFFICIAL DESIGNATION	DATE EXAMINED .		
	9-5-18		

110/00