CS Form No. 211 Revised 2017

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/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	
GuINO	con, RY	USU		
ADDRESS				
Apt. 8	6 VSU			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
36	M	Married		

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached example above named individual and found him/her to be physically and medically			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
GUINOCOR, MERRY CHRIST'L S.			
AGENCY/Affiliation of Licensed Government Physician:			
Vsu			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	1,77 m	101 45	D+
OFFICIAL DESIGNATION	DATE EXAMINED		
	12-19-12		