CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

 This medical certificate should be accomplished by a go Attached this certificate to original appointments and re 		
NAME (Last, First, Middle, or if married woman, Maiden Name)	AGENCY ADDRESS	
PATINDOL, TEOFANES ANDOY ADDRESS		
VSU BAYBAY CITY LEYTE	VSU	
AGE SEX CIVIL	PROPOSED POSITION	
52 MALE STATUS MARRIED	PROPESSOR III	-
Pre-Employment Medical-Physical	Tests	
1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If	necessary)	
FOR THE PHYSICIAN		
I HEREBY CERITIFY that I have personally examined the above	e-named Affix Documentary	
individual and found her/him to be physically and medically fit/unfi		
PRINTED NAME/SIGNATURE OF PHYSICIAN CERTIFICATE NO. MERRY CHIEFLY, SINGER OFFICER III. Medical Officer III. License No. 111028	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
OFFICIAL DESIGNATION	HEIGHT WEIGHT BLOOD TYPE (Baseloot) (Stripped) 169 cm 69.5 kg	BP 110/70 mmltg
AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines	DATE EXAMINED	