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:

e at	tached to this form:
	Blood Test
	Urinalysis
	Chest X-Ray
	Drug Test
	Psychological Test
	Neuro-Psychiatric Examination (if applicable

FOR THE PROPOSED APPOINTEE

	ne, First Name, Name Extens	AGENCY/ADDRESS National Cocomol Research Center - Virayas VSN, Baybay City, Leyte	
ADDRESS	one-4, Upper C		
AGE 18	SEX F	CIVIL STATUS Married	PROPOSED POSITION Sci. Res. Asst.

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exabove named individual and found him/her to be physically and medically	xamination result	s, personally of for employme	examined the nt.
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: JOSEPHINE ZAFICO, M.D. AGENCY/Affiliation of Licensed Government Physician: WWW. Harr WW.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
075699	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
OFFICIAL DESIGNATION Used offin in	DATE EXAMINED	29(19	