MEDICAL CERTIFICATE

(For Employment)

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- 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	AGENCY / ADDRESS			
POLIQUIT, MARIA ARI				
ADDRESS		DBM- NSU Baybay City,		
BRGY. STA. CRUZ, BATE	DAY CITY, LEXTE	leyte		
AGE SEX	CIVIL STATUS	PROPOSED POSITION		
42 +	MARRIED	INSTRUCTOR !		

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached e			xamined th		
above named individual and found him/her to be physically and medically	ZFIT / UNFIT fo	or employment.			
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE				
Christelle Venus F. Capuno, M.O. Lic. No. 0156881					
AGENCY/Affiliation of Licensed Government Physician:					
Wester Ven					
LICENSE NO.	HEIGHT (M)	WEIGHT (KG)	BLOOD		
0104884	Bare Foot	Stripped	TYPE		
010 4 0 09	1-51 m	53 kg			
OFFICIAL DESIGNATION	DATE EXAMINED				
M.O. 111	7-11-2024				

BP 110 70 mm Hg