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

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)

Chest X-Ray Drug Test

☐ Psychological Test

☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

AGENCY / ADDRESS

ADDRESS	iere, Wilma	PROPOSED POSITION		
Zme Z	May. Gua			
58	Female	,M	Adam Office V (Cashy)	

FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: MERRY (HIST I, SUPPLY MADE) Medical Officer 318 License No. 1 1 1 8 2 8	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE				
AGENCY/Affiliation of Licensed Government Physician:	arteria.				
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE		
OFFICIAL DESIGNATION	DATE EXAMINED				
medical Opporior M	11-8-24				