

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:

- ☐ 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) LORETO, RAFFY ANDREW GARCIA | | | AGENCY / ADDRESS DEPARTMENT OF CIVIL ENGINEERING |
| ADDRESS APT 89, KILBOURNE ST, VSU, BAYBAY CITY, LETTE | | | |
| AGE 28 | SEX MALE | CIVIL STATUS SINGLE | PROPOSED POSITION INSTRUCTOR I |

FOR THE LICENSED GOVERNMENT PHYSICIAN

| | | | |
|--|--|--|----------------------------|
| I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment. | | | |
| SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: Elwin Jay V. Yu, M.D. Chief of Hospital License No. 098800 | | OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE Community Acquired Pneumonia Low Risk | |
| AGENCY/Affiliation of Licensed Government Physician: | | | |
| LICENSE NO. | HEIGHT (M) Bare Foot 1.65 | WEIGHT (KG) Stripped 98.8 kg | BLOOD TYPE O+ |
| OFFICIAL DESIGNATION | | DATE EXAMINED JAN 04, 2019 | |