

**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) <i>Pomida Argina Masas</i>		AGENCY / ADDRESS	
ADDRESS <i>H-1 Duplex, Visca, Varig State College, Baybay City, Zebu</i>		<i>Van</i>	
AGE <i>54</i>	SEX <i>Female</i>	CIVIL STATUS <i>married</i>	PROPOSED POSITION <i>asso. Prof. I</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: <i>MERRY CHRIST L. T. SUPNET-QUINOCOR, M.D.</i> Medical Officer III License No. 111828		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot <i>155</i>	WEIGHT (KG) Stripped <i>85</i>	BLOOD TYPE <i>O</i>
OFFICIAL DESIGNATION	DATE EXAMINED <i>11-14-19</i>		