

# MEDICAL CERTIFICATE

(For Employment)

## INSTRUCTIONS


- This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- 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) <b>BARRERA, JOMARI JOSEPH ALTNO</b>			AGENCY / ADDRESS <b>DCST</b>
ADDRESS <b>E. JACINTO ST. ZONE 23 BAYBAY CITY</b>			
AGE <b>28</b>	SEX <b>MALE</b>	CIVIL STATUS <b>SINGLE</b>	PROPOSED POSITION <b>REGULAR (PERMANENT)</b>

## 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 type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  <b>SARAH AURORA V. TABORDA, M.D.</b>		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician: <b>VSU Infirmary</b>			
LICENSE NO. <b>0153151</b>	HEIGHT (M) Bare Foot <b>170.2</b>	WEIGHT (KG) Striped <b>112.5</b>	BLOOD TYPE <b>A+</b>
OFFICIAL DESIGNATION <b>Medical officer III</b>	DATE EXAMINED		

BP