## 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)			AGENCY / ADDRESS		
De los	Santos, Jares	Aleais Apurillo	Conlege of Nuking, Visaga State University,		
VEN Baybay leyte		di ettividi tiin oo uutaasiin oo aa oo	Visca Baybay city leyte		
AGE SEX		CIVIL STATUS	PROPOSED POSITION		
39 temale		Married	Associate Propercor IV		

## FOR THE LICENSED GOVERNMENT PHYSICIAN

	10-5-2022		
OFFICIAL DESIGNATION	DATE EXAMINED		
	C //2	62 kg	AB
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG)	BLOOD TYPE
AGENCY/Affiliation of Licensed Government Physician:			
CUCym	PROPOSED APPOINTEE		
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE		
I hereby certify that I have reviewed and evaluated the attached exabove named individual and found him/her to be physically and medically	karnination result ∆FIT / □UNFIT fo	ts, personally e or employment	examined the