ADDRESS

26

AGE

SEX

M

## MEDICAL CERTIFICATE

(For Employment)

	INSTRUCTIONS	
	a. This medical certificate should be accomplished by a lice b. Attach this certificate to original appointment, transfer and c. The results of the following pre-employment medical/phys must be attached to this form:  Blood Test Urinalysis Chest X-Ray Drug Test Psychological Test Neuro-Psychiatric Examination (if applicable)	d reemployment.
	FOR THE PROPOSED APP	POINTEE
NAME (Last Name, First Name, Name Extension (if any) and Middle Name)		AGENCY / ADDRESS
BANTASAN,	JADE BARACHEL D	

## FOR THE LICENSED GOVERNMENT PHYSICIAN

BARTOUNI APARTMENT BROY. GUADALUPE BARBAY CITY LOYPE

CIVIL STATUS

S

DLABS VSU

PROPOSED POSITION

College Instructor

above named individual and found him/her to be physically and medically.	□FIT / □UNFIT	for employment	*
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	147	82	0
OFFICIAL DESIGNATION	DATE EXAMINE		