MEDICAL CERTIFICATE

(For Employment)

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- 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

☐ Neuro-Psychiatric Examination (if applicable)

Psychological Test

FOR THE PROPOSED APPOINTEE

NAME (Last Name,	First Name, Name Extension (if	AGENCY / ADDRESS					
LAO, V	INCE, GONZA	LES	ICH DOM				
ADDRESS		4	VSU-DBM				
ZONE 19, BAYBAY CITY, LEYTE							
AGE	SEX	CIVIL STATUS	PROPOSED POSITION				
26	M	SINGLE	Instructor III				

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exapove named individual and found him/her to be physically and medically	amination result FIT / □UNFIT t	s, personally e for employment	examined the t.	
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: MERRY (HRISTLT, SUPNET-GUILLOW, M.D., Medical Officer License No. 1118 / 8	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
AGENCY/Affiliation of Licensed Government Physician: VSV Hospital				
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
OFFICIAL DESIGNATION	DATE EXAMINED			
Meteral Opprocess III	4- 29	-7M		

4-29-24

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