## 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/mental examinations must be attached to this form:

| Blood Test                                |      |
|---|------|
| <b>Urinalysis</b>                         |      |
| Chest X-Ray                               |      |
| Drug Test                                 |      |
| Psychological Test                        |      |
| Neuro-Psychiatric Examination (if applica | ble) |

## FOR THE PROPOSED APPOINTEE

| NAME (Last Nar | ne, First Name, Name Exte | nsion (if any) and Middle Name) | AGENCY / ADDRESS       |  |
|----------------|---------------------------|---------------------------------|------------------------|--|
| Panat          | o, my ma sta              | New A to the first              |                        |  |
| ADDRESS 97     | y O veloso s              | Visca, Borghory, Ugto           |                        |  |
| AGE SEX        |                           | CIVIL STATUS                    | PROPOSED POSITION      |  |
| 57             | temole                    | Single                          | Mynistratic officer IL |  |

## FOR THE LICENSED GOVERNMENT PHYSICIAN

| I hereby certify that I have reviewed and evaluated the attached exabove named individual and found him/her to be physically and medically SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:   | ZFIT / □UNFIT           |                         | ent.  |  |
|--|-------------------------|-------------------------|-------|--|
| The state of the s | PROPOSED APPOINTEE      |                         |       |  |
| MERRY CHRIST LT. SUPPER GUI COR, M.D.  AGENCY/Affiliation of Licensed Government Physician:  |                         |                         |       |  |
| LICENSE NO.  | HEIGHT (M)<br>Bare Foot | WEIGHT (KG)<br>Stripped | BLOOD |  |
|  | 1380-                   | 186.                    | 0 4   |  |
| OFFICIAL DESIGNATION   | DATE EXAMINED           |                         |       |  |
|  |                         | 4-19-18                 |       |  |