MEDICAL CERTIFICATE

(For Employment)

INSTRU	JCTI	ONS	
--------	------	-----	--

- 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		
GLORY JUVYLYN ROMEA ADDRESS			Thilkot Coops- USU	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
25	FEMALE	SINGLE	SRA	

FOR THE LICENSED GOVERNMENT PHYSICIAN

		1.17	
OFFICIAL DESIGNATION	DATE EXAMINED		
	165-	J7-JX	10 m
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD
AGENCY/Affiliation of Licensed Government Physician:	m		
Elwin Jay V. Yu, M.D.	PROPOSED APPOINTEE		
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE		