## 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
Unnalysis

Chest X-Ray

■ Drug Test

■ Psychological Test

■ Neuro-Psychiatric Examination (if applicable)

## FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name E	AGENCY / ADDRESS	
Valenzona Ma	ario Asmelo	1/c
Tab-ang, Kum	V XVI	
SE SEX CIVIL STATUS		PROPOSED POSITION
63 M	Married	SRA

## FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached example above named individual and found him/her to be physically and medically are the found him/her to be physically and the found him/her to be physical	mination result	ts, personally e or employment.	examined the
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)	BLOOD TYPE
	153	Ce4-	114"
OFFICIAL DESIGNATION	DATE EXAMINED		
	R-4-27		