

(Neuro Psychiatric Test) Ormoc City (053-832-3123)

Date: 13/July 2023

| PURPOSE OF | EXAMINATION: | | EMPLOY | MENT | | | | |
|--|---------------------|---------|--------|----------|------|----|------|---------|
| NAME: | MONTALBAN, | APRIL . | ANN O. | | Age: | 40 | C.S: | MARRIED |
| HOME ADDRE | SS: BAYBAY | | | | | | | |
| EDUCATIONA | L ATTAINMENT: | C | OLLEGE | GRADUATE | | | | |
| PURPOSE/ DATE OF PREVIOUS NP EXAMINATION | | | | | | | | |
| | | | | | | | | |

| FACTORS | ABSENT | LOW | AVERAGE | HIGH |
|---|--------|-----|---------|------|
| INTELLIGENCE | | | | |
| Capacity for Abstraction | | | × | |
| Organizational Capacity | | | * | |
| Learning Activities | | | × | |
| 4. Alertness | | | * | |
| | | | | |
| MANNER OF COMMUNICATION PREFERRED | | | | |
| 1. Verbal | | | × | |
| 2. Non-Verbal | | | × | |
| | | | | |
| EMOTIONAL STABILITY | | | | |
| Coping with Stress | | | × | |
| Control of Aggressive hostile impulse | | | × | |
| Free from neuro tendencies | | | * | |
| | | | | |
| VALUES | | | | |
| Positive | | | × | |
| 2. Negative | | | × | |
| | | | | |
| EDUCATION: Relevant Training | | | × | |
| EXPERIENCE: Security Training | | | | |
| Handling Guns | | | | |
| Others: | | | | |
| | | | | |
| MOTIVATION: Security Reasons | | | | |
| Self-esteem / confidence | | | × | |
| Others: | | | | |
| 505111 10 1071011171 | | | | |
| SOCIAL ADAPTABILITY: | | | | |
| 1. With people in general | | | × × | |
| 2. With peers | | | * | |
| 3. With supervisor | | | | |
| 4. With subordinates | | | * | |
| WORK ATTITUDES: | | | | |
| 1. Responsibility | | | * | |
| 2. Loyalty | | | * | |
| 3. Perseverance | | | × | |
| 4. Initiative | | | * | |
| T. IIIIIIIIII | | | | |

| R | ŀΕ | N | M | \R | K | S |
|---|----|---|---|----|---|---|
| | | | | | | |

Psychological: No gross psychological abnormality

Neuro Psychiatric Negative psychiatric disorder.

| RECOMMENDATIO | N | Į |
|---------------|---|---|
|---------------|---|---|

| FOR FIREARMS LICENCE | |
|-------------------------------------|--|
| Recommended for possession | |
| Recommended permit to carry | |
| Needs training on handling to carry | |
| Not recommended | |

| FOR SECL | JRITY GUA | RDS/OTHERS |
|----------|-----------|------------|

★ Recommended with Recommended risk Needs training

Not recommended

LYN L. VERONA, MD Psychiatrist / NP Screener Accreditation / PRC No. 80515