

## 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
- ☒ 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) <b>MANADONG, MAUREN JOY FAVER</b>			AGENCY / ADDRESS <b>VSU - BATBAY CITY</b>
ADDRESS <b>VSU CAMPUS, PANLAWAN, BATBAY CITY</b>			
AGE <b>32</b>	SEX <b>FEMALE</b>	CIVIL STATUS <b>MARRIED</b>	PROPOSED POSITION <b>INSTRUCTOR I</b>

### FOR THE LICENSED GOVERNMENT PHYSICIAN

<i>I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.</i>			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  <div style="text-align: center;">   <b>Christelle Venus F. Capung, M.D.</b>            Lic. No. 0156881         </div>		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician: <b>VSU USHER</b>			
LICENSE NO. <b>615288</b>	HEIGHT (M) Bare Foot <b>180</b>	WEIGHT (KG) Stripped <b>54</b>	BLOOD TYPE <b>" "</b>
OFFICIAL DESIGNATION <b>Medical Officer III</b>		DATE EXAMINED <b>7 December 2023</b>	

*Dr. 10/02*