MEDICAL CERTIFICATE

(For Employment)

١	N	S	T	R	U	C	T	0	N	S

- 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 Nam	e, First Name, Name Extension	AGENCY / ADDRESS				
GEROMO	, RONEL , BANK	4TA	VISAGHS STATE UNIVERSITY VISCA, GRYBAY C MY, LEYTE			
ADDRESS						
GABA	S, BAYBAY CITY,	LOYTE				
AGE	SEX	CIVIL STATUS	PROPOSED POSITION			
23 MALE		SINGLE	REGULAR INSTRUCTOR (TEMP.)			

FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
AGENCY/Affiliation of Licensed Government Physician:				
LICENSE NO. MERNI (INS) JUNE GUINO M.D. Medical Officer III License No. 111828	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
OFFICIAL DESIGNATION	DATE EXAMINED A- (1- 2)			