## MEDICAL CERTIFICATE

(For Employment)

|  | ISTRUCTION | - | IN | U | 1 1 | C | U | K |  | 0 | IN | 1 |
|--|------------|---|----|---|-----|---|---|---|--|---|----|---|
|--|------------|---|----|---|-----|---|---|---|--|---|----|---|

- 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  |  |
|---|-----------------|--------------|-------------------|--|
| BALOND  | o, ETEN OLIVER  | CALLEON      | VSU-DBS           |  |
| ADDRESS   |                 |              |                   |  |
| BRGY. GAR   | AS, BAYBAY CUTY | , LEYTE      |                   |  |
|   |                 |              |                   |  |
| AGE   | SEX             | CIVIL STATUS | PROPOSED POSITION |  |

## FOR THE LICENSED GOVERNMENT PHYSICIAN

| 4 · 28 · 21  |  |  |  |
|--|--|--|--|
| 1.63   | 93.2   | `A+"   |  |
| HEIGHT (M)  Bare Foot  | WEIGHT (KG)<br>Stripped  | BLOOD  |  |
|  |  |  |  |
|  |  |  |  |
| pering the finders received in frequency (all the collections) throughout proposed and water | organ felikin mendikan dian mengan pengan kalauan pengan kelalah dian bangah kayaba basa |  |  |
| OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE   |  |  |  |
|  | HEIGHT (M) Bare Foot  1.63   | PROPOSED APPOIN  HEIGHT (M) WEIGHT (KG) Bare Foot Stripped |  |

BP