CS Form No. 211 Revised 2018

AGE

27

MEDICAL CERTIFICATE

(For Employment)

	INSTRUCTIONS	
а	This medical certificate should be accomplished by a licensed government physician	

and the state of t
 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)

DATAN	, MALVIN	RELMÍ	
hillii.	, WILL LUIN	KELIVII	

ADDRESS

M

SEX

BAYBAY PANGA SUGAN,

CITY. CIVIL STATUS

PINGLE

IN STRUCTOR

VCU

MI

BAYBAY CITY

AGENCY / ADDRESS

PROPOSED POSITION

FOR THE LICENSED GOVERNMENT PHYSICIAN

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 ZFIT / □UNFIT for employment. SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: OTHER INFORMATION ABOUT THE

Chief of Hospital I

Constant Physician:

Seretale WEIGHT (KG)

Stripped

78-2

PROPOSED APPOINTEE

HEIGHT (M) Bare Foot 1.73

BLOOD

OFFICIAL DESIGNATION

AGENCY/Affiliation of Lic

LICENSE NO.

DATE EXAMINED