MEDICAL CERTIFICATE

(For Employment)

			C		

- 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/ ${\tt psychological}$

must be attached to this form:

Blood Test

MEDICKI OFFICE III

Urinalysis
Chest X-Ray

☐ Drug Test

☐ Psychological Test

☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Nam	ne, First Name, Name Extension	AGENCY / ADDRESS			
ALM	eroda fedi	LITO MAHATAD	1TEEM		
ADDRESS			1)02//		
BK	G1. OLAPALAPS,				
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
56	MALE	MARRIED	ADMIN. AIDE 1		

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exabove named individual and found him/her to be physically and medically [3]					
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE				
AGENCY/Affiliation of Licensed Government Physician: VEU INFIRMARY KOSPITAL					
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD		
0/\$687	158 cm	55-2/9			
OFFICIAL DESIGNATION	DATE EXAMINED				

13/20/30/30

January