CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

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 This medical ce Attached this c 	ertificate should be acco ertificate to original app	omplished by a pointments and	government p d reinstatement	hysician. ts.	
NAME (Last, First, Middle	or if married woman, Maiden	AGENCY ADDRESS			
Dargantes Toni		VSV, ViSCA, Baybay City, Leyte.			
ADDRESS Villa Trinidad, B	rgy-baac, Baybay (ity, Legt	leyte.		
AGE	SEX	CIVIL	PROPO	SED POSI	TION
33	Married Admin. Asst. VI				
	Pre-Employment	Medical-Phys	ical Tests		
I HEREBY CERITIF	1 Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatri FOR TH	IE PHYSICIAN			ocumentary
	er/him to be physically an				
JOSEPHINE O. ZA Medical Office License No. 07	CERTIFICATE NO	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
OFFICIAL DESIGNATION	2899 MUSTURON		HEIGHT (Barefoot)	WEIGHT (Stripped)	BLOOD TYPE
- A			M3cm	60.5kg	B
AGENCY: Visca, E	DATE EXAMINED 12/21/16 .				