

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

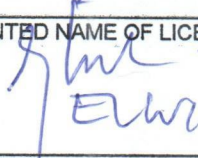

- a. This medical certificate should be accomplished by a licensed government physician.
 b. Attach this certificate to original appointment, transfer and reemployment.
 c. The results of the following pre-employment medical/physical/**psychological** must be attached to this form:

- ☒ 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) CAPUNO, CHARMAGNE FAITH FELICUDA			AGENCY / ADDRESS
ADDRESS APT 42 KILBOURNE STREET, USU, BAYBAY CITY, LEYTE			
AGE 30	SEX F	CIVIL STATUS SINGLE	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 <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  ELWIN JAY UYAN		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE 	
AGENCY/Affiliation of Licensed Government Physician: USPHS USU			
LICENSE NO. 98800	HEIGHT (M) Bare Foot 1.52	WEIGHT (KG) Stripped 52	BLOOD TYPE B+
OFFICIAL DESIGNATION Chief of Hospital I		DATE EXAMINED 9/14/23	