## MEDICAL CERTIFICATE

(For Employment)

-	N	S	Т	R	11	C	T	1	0	N	ç
	1 4	$\overline{}$	1	11	~					1.4	-

- 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

	irst Name, Name Extensio	AGENCY / ADDRESS			
		Dominic Madredijo	Visagas state University		
ADDRESS	and the second s	U	Bayong UTY, legt		
Apt. 92, Kill	hourne st. Visa	yas Ante University, Baylong			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
32	Male	Married	Instructor ill		

## 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 AFIT / UNFIT for employment. SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE

Chief of Hospital I License No. 098860 AGENCY/Affiliation of Licensed Government Physician:

> Christolle Venus F. Capuno, M.D. Lic. No. 0190081

WEIGHT (KG)

DATE EXAMINED

BLOOD

OFFICIAL DESIGNATION

LICENSE NO.

HEIGHT (M)

Bare Foot 166-5