CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

1. This medical	certificate should be a	STRUCTIONS accomplished by a go	overnment p	hysician.		
2. Attached this certificate to original appointments and re NAME (Last, First, Middle, or if married woman, Maiden Name) GUMBOD, ORLSO			AGENCY ADDRESS			
ADDRESS						
AGE 57go	SEX	CIVIL STATUS	PROPOSED POSITION			
		iatric Examination (If			- \(\)	T
I HEREBY CERIT	e-named fit for	named Affix Documentary For Stamp				
PRINTED NAME/SIGNA	TURE OF PHYSICIAN	CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
LIC	UFFICERIVI SU HOSPITAL 共098800		HEIGHT (Barefoot)	WEIGHT (Shipped) 73 kg/	BLOOD TYPE	13/
AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines			DATE EXAMINED			