## 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/mental examinations 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	e, First Name, Name Extensi	AGENCY / ADDRESS	
EBIT, F	HILIP CAES	AR LUNA	VISAYAS STATE UNIVERSITY
Apt. 73	, KILBOURNE	DRIVE, VSV, BAYBAY	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
28	MALE	MARRIED	INSTRUCTOR 1

I hereby certify that I have reviewed and evaluated the attached ex- above named individual and found <u>him</u> /her to be physically and medically	amipation result □ <b>FIT</b> / □ <b>UNFI</b>	s, personally of <b>r</b> for employm	examinea the ent.
MERRY CHRISTILL, SUPPLY GUINOCOR, M.D.  Medical Officer III.  AGENCY/Affiliation of Licensed Government Physician:		FORMATION A POSED APPOII	
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	85-4	les	" b"
OFFICIAL DESIGNATION	DATE EXAMINED		
	ó	8-18	