MEDICAL CERTIFICATE

(For Employment)

1	N	S	T	R	U	C.	Т	10	N	S

- 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	e, First Name, Name Extension	n (if any) and Middle Name)	AGENCY /	ADDRESS
CARDAN	io, CHINELO	MENDEZ	110. 14	
ADDRESS			VICATAS STA	TE LIAVERSITY
GUADAL	MPE, BAYBAY	CITY		
AGE	SEX	CIVIL STATUS	PROPOSEI	POSITION
26	FEMALE	SINGLE	TEMPORARY	REGULAR

FOR THE LICENSED GOVERNMENT PHYSICIAN

LICENSE NO.	HEIGHT (M)	WEIGHT (KG)	BLOOD
LICENSE NO.	HEIGHT (M) Bare Foot	Stripped	TYPE
LICENSE NO. OFFICIAL DESIGNATION	Bare Foot	Stripped 51 Per	

100/70