CSC Form No. 211 (Revised August 1998) MEDICAL CERTIFICATE For Employment

INC	TDI	ICT	10	NIC
INS	INU		10	142

MANGADANG, EUGENE VAL DELA CRUSE ADDRESS API JOZ WARNER ST, VICAYAS STATE UNIVERSITY, BAYBAY CETY,				AGENCY ADDRESS		
APT JO2 WARNE LEXTE AGE ALL	SEX M	CIVIL STATUS	_	PROPOSED POSITION		
	Pro Employe	ment Medical-Physica	INSTRUCTOR I			
	PAP -97/49	R THE PHYSICIAN				
I HEREBY CERITIFY that I have personally examined the above- individual and found her/him to be physically and medically fit/unfit employment			e-named fit for	named Affix Documentary for Stamp		
MERRY CHRIST	INATURE OF PHYSICIAN IT, SUPNIT GUNOCOR, M.D. ICAI Officer III SE No. 111828	CERTIFICATE NO.		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
OFFICIAL DESIGNAT	ION		HEIGHT (Barefoot)	WEIGHT (Stripped)	BLOOD TYPE	
VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines			DATE EXAMINED			