MEDICAL CERTIFICATE

(For Employment)

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- 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, Fir	rst Name, Name Extension	AGENCY / ADDRESS			
Belmia	Jed Don	ninique S.			
ADDRESS		VSU, Baybary			
8 Kilbou	rne St. 18	, , , ,			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
31	m	Single	Instructor 11		

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 \(\subseteq FIT / \subseteq UNFIT for employment. \) SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE Christelle Venus F. Capuno, M.O. Lic. No. 0156881 AGENCY/Affiliation of Licensed Government Physician: USU LICENSE NO. HEIGHT (M) WEIGHT (KG) BLOOD Bare Foot Stripped TYPE 0156881 t69cm OFFICIAL DESIGNATION DATE EXAMINED MOM