MEDICAL CERTIFICATE

(For Employment)

INSTRUCTION	CTIO	U	R	T	S	N	1
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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, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS	
BALLENT	BS , VERA S	TEPHANJE BAYOG	CVIA VICI	
BREY. GABAS, BAY BAY CITY, LEVILE		CITY, LEVIE	CVM VSV	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
29	F	SINGLE	ADMINISTRATIVE ASJISTANT 1	

FOR THE LICENSED GOVERNMENT PHYSICIAN

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
MERRY CHRIST'L T. SUPNET GUINOCOR, M.D. AGENCY/Affiliation of Control of Con			
		WEIGHT (KG)	BLOOD
LICENSE NO.	HEIGHT (M) Bare Foot	Stripped	K O 4