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/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 Nan	ne, First Name, Name Ext	ension (if any) and Middle Name)	AGENCY / ADDRESS	
LIMB	ASAN, MAK	LY ANN , T.	Department of Agronomy	
ADDRESS			, , ,	
Broy. Pa	angaeugan, lh	and ban City, Lente	i literaki di i	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
221	F	Single	Part-time Instructiv	

FOR THE LICENSED GOVERNMENT PHYSICIAN

SARAH AURORA W. TABADA, M.D. MEDICAL W. FRIGUE III	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
	1.57 m	50.2 kg	
	DATE EXAMINE	D	
OFFICIAL DESIGNATION	A STATE OF THE PARTY OF THE PAR		

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