

## 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 Name, First Name, Name Extension (if any) and Middle Name) <b>AMBERTO, NILDA</b>			AGENCY / ADDRESS  <b>you</b>
ADDRESS <b>APT. 69 KILBOURNE ST., YOU, VIGOR, Baybay City</b>			
AGE <b>55</b>	SEX <b>Female</b>	CIVIL STATUS <b>Married</b>	PROPOSED POSITION <b>Assoc. Prof. V</b>

## 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 <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: <b>MERRY CHRIST'L T. SUPNET-GUNOCOR, M.D.</b> Medical Officer III License No. 111828		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot <b>147</b>	WEIGHT (KG) Stripped <b>45</b>	BLOOD TYPE <b>B+</b>
OFFICIAL DESIGNATION	DATE EXAMINED <b>11-14-79</b>		

BP-120/BOMMB