

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>ALCOBER, ED ALLAN. LLANO</b>			AGENCY / ADDRESS <b>VSU, VISCA, BAYBAY CITY, LAYTE</b>
ADDRESS <b>DUPLEX B-1 VSU, VISCA, BAYBAY CITY, LAYTE</b>			
AGE <b>40</b>	SEX <b>MALE</b>	CIVIL STATUS <b>MARRIED</b>	PROPOSED POSITION <b>ASSOCIATE PROF. 2</b>

FOR THE LICENSED GOVERNMENT PHYSICIAN

<i>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.</i>			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: <b>Elwin Jay V. Yu, M.D.</b> <b>Chief of Hospital</b> <b>License No. 098800</b>		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot <b>155</b>	WEIGHT (KG) Stripped <b>69.54</b>	BLOOD TYPE <b>O<sup>+</sup></b>
OFFICIAL DESIGNATION	DATE EXAMINED <b>11/14/14</b>		

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