

**MEDICAL CERTIFICATE**

For Employment

**INSTRUCTIONS**

1. This medical certificate should be accomplished by a government physician.
2. Attached this certificate to original appointments and reinstatements.

NAME (Last, First, Middle, or if married woman, Maiden Name) <b>ARMECIN, ROMEL B.</b>		AGENCY ADDRESS <b>Visca, Baybay, Leyte</b>		
ADDRESS <b>VSU, Visca, Baybay, Leyte</b>				
AGE <b>50</b>	SEX <b>Male</b>	CIVIL STATUS <b>Married</b>	PROPOSED POSITION <b>Prof. II</b>	
<b>Pre-Employment Medical-Physical Tests</b> <ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> Blood Test</li> <li>2. <input checked="" type="checkbox"/> Urinalysis</li> <li>3. <input checked="" type="checkbox"/> Chest X-ray</li> <li>4. <input checked="" type="checkbox"/> Drug Test</li> <li>5. <input type="checkbox"/> Neuro-Psychiatric Examination (If necessary)</li> </ol>				
<b>FOR THE PHYSICIAN</b>				
I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be <u>physically and medically</u> fit/unfit for employment <i>on my morning</i>			Affix Documentary Stamp	
PRINTED NAME/SIGNATURE OF PHYSICIAN <b>MERRY CHRIST'L T. SUPNET-GUINOCOR, M.D.</b> Medical Officer III License No. 111828		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
OFFICIAL DESIGNATION		HEIGHT (Barefoot) <b>155cm</b>	WEIGHT (Stripped) <b>70.1 Kg</b>	BLOOD TYPE <b>O</b>
AGENCY: <b>VSU HOSPITAL</b> <b>Visayas State University</b> <b>Visca, Baybay, Leyte, Philippines</b>		DATE EXAMINED <b>7-01-17</b>		

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