

### 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) ALCOBER, ED ALLAN LLANO			AGENCY ADDRESS XORONOMY, VSU		
ADDRESS DUPLEX B-1 VSU, VISCA, BAYBAY CITY, LEYTE			VISCA, BAYBAY CITY, LEYTE		
AGE 35	SEX Male	CIVIL STATUS Married	PROPOSED POSITION Asst. Prof IV		
Pre-Employment Medical-Physical Tests					
<ol style="list-style-type: none"> <li>1. Blood Test</li> <li>2. Urinalysis</li> <li>3. Chest X-ray</li> <li>4. Drug Test</li> <li>5. Neuro-Psychiatric Examination (If necessary)</li> </ol> <p>7 Refer to Refr. for</p>					
FOR THE PHYSICIAN					
I HEREBY CERTIFY that I have personally examined the above-named individual and found her/him to be <u>physically and medically fit/unfit</u> for employment					Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN JOSEPHINE O. ZAFICO, M.D.		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
OFFICIAL DESIGNATION MEDICAL OFFICER III LIC. # 075690			HEIGHT (Barefoot)	WEIGHT (Stripped)	BLOOD TYPE
AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines			DATE EXAMINED 12/4/14		