CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

INSTRUCTIONS

1. This medical certificate should be accomplished by a government physician.

NAME (Last, First, Middle, or if married woman, Maiden Name)			AGENCY ADDRESS		
ABAD, HANNAH RISSAH FORIO			DMP, VSU		
CARIDAD /	BAUBAU, L	EYTE			
AGE 30	SEX F	CIVIL STATUS Married t Medical-Physica	Asst Prop. I		
	4. Drug Test 5. Neuro-Psychiatr かパートリンプート	ic Examination (If		'	
I HEREBY CERITIFY tindividual and found her/hemployment	hat I have personally im to be physically ar	examined the above	e-named it for	1 00	Pocumentary Stamp
individual and found her/h employment	im to be physically an	examined the above and medically fit/unf	it for	DRMATION AS	Stamp
individual and found her/h employment PRINTED NAME/SIGNATURE O	of PHYSICIAN AFICI M 17	nd medically fit/unf	it for	DRMATION AS	Stamp