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| 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) ACABAL, ALICE MARTINEZ | | AGENCY ADDRESS VSU | |
| ADDRESS DOPAC, VSU | | | |
| AGE 28 | SEX F | CIVIL STATUS M | PROPOSED POSITION ASSO PROF V |
| Pre-Employment Medical-Physical Tests <div>1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If necessary)</div> <p>) Ref to Lab's files</p> | | | |
| FOR THE PHYSICIAN | | | |
| I HEREBY CERTIFY that I have personally examined the above-named individual and found <u>her/him</u> 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. # 075699 | | HEIGHT (Barefoot) 152 | WEIGHT (Stripped) 60 kgs. BLOOD TYPE "A+" |
| AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines | | DATE EXAMINED 11/7/15 | |

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