AGENCY:

VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines

	IN	ISTRUCTIONS				
 This medical Attached thin 	certificate should be a s certificate to original	accomplished by a g appointments and	overnment reinstateme	physician. nts.		
NAME (Last, First, Middle, or if married woman, Maiden Name)			AGENCY ADDRESS			
ASIO VICTOR BINGCO						
ADDRESS •	Baybas, Leyte					
AGE	SEX	CIVIL	PROPOSED POSITION			
49	49 M STATU			Professor 6		
	Drug Test Neuro-Psychi	atric Examination (f necessary)		
	FOR	THE PHYSICIAN				
I HEREBY CERIT individual and found employment	IFY that I have personal her/him to be physically	lly examined the above and medically fit/un	re-named fit for		Documentary Stamp	
individual and found	her/him to be physically	lly examined the above and medically fit/un	fit for		Stamp	
PRINTED NAME/SIGNAT	her/him to be physically	certificate No.	fit for	ORMATION A	Stamp	
individual and found employment	her/him to be physically URE OF PHYSICIAN	y and medically fit/un	fit for	ORMATION A	Stamp	

DATE EXAMINED

ulnh