SEX

AGE

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTION	IS
a. This medical certificate should be accomplished by a b. Attach this certificate to original appointment, transfe c. The results of the following pre-employment medical/must be attached to this form: Blood Test Urinalysis Chest X-Ray Drug Test Psychological Test Neuro-Psychiatric Examination (if applicable)	r and reemployment. /physical/ psychological
FOR THE PROPOSED A	PPOINTEE
NAME (Last Name, First Name, Name Extension (if any) and Middle Name)	AGENCY / ADDRESS
Belonias Beatriz Satentes	Visayas State Leviv.

PROPOSED POSITION

FOR THE LICENSED GOVERNMENT PHYSICIAN

AGENCY/Affiliation of Licensed Government Physician:			OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:					
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE		
	Ney-	63.5	D		
OFFICIAL DESIGNATION D	DATE EXAMINED				