

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)			AGENCY ADDRESS		
DACLAG, JOCELYN GUNDAYA			VISAYAS STATE UNIVERSITY		
ADDRESS					
235 R. MAGSAYSAY AVE, ZONE 19, BAYBAY CITY, LEYTE					
AGE	SEX	CIVIL STATUS	PROPOSED POSITION		
37	FEMALE	MARRIED			
Pre-Employment Medical-Physical Tests					
<div>1. <input checked="" type="checkbox"/> Blood Test</div> <div>2. <input checked="" type="checkbox"/> Urinalysis</div> <div>3. Chest X-ray</div> <div>4. Drug Test</div> <div>5. Neuro-Psychiatric Examination (If necessary)</div>					
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</u> fit/unfit for employment					Affix Documentary Stamp
PRINTED NAME/SIGNATURE OF PHYSICIAN		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
MERRY CHRIST'L T. SUPNET-GUINOCOR, M.D. Medical Officer III License No. 111828					
OFFICIAL DESIGNATION			HEIGHT (Barefoot)	WEIGHT (Stripped)	BLOOD TYPE
			151 cm	50 kg	B+
AGENCY:			DATE EXAMINED		
VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines			1-25-17		