MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
- b. Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/mental examinations must be attached to this form:

	Blood	Test
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☐ Urinalysis ☐ Chest X-Ray

Drug Test
Psychological Test

☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS	
Clor	le, aven	y.		D
ADDRESS		0	1821	payous taya
APH. CO4	kilbaurre Dr	The VSM Pangasuzan Panybay	Y	0 0
AGE	SEX	CIVIL STATUS	F	PROPOSED POSITION
40	Female	Muriel	associ	iate Professor 1

FOR THE LICENSED GOVERNMENT PHYSICIAN

OFFICIAL DESIGNATION	DATE EXAMINED			
075699	157	69.4 kg	8	
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE	
AGENCY/Affiliation of Licensed Government Physician:				
SIGNATURE OVER PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			

BP 110/60 mont