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CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

## INSTRUCTIONS

<ol> <li>This medical certificate should be accomplished by a go</li> <li>Attached this certificate to original appointments and re</li> </ol>			,	
NAME (Last, First, Middle, or if married woman, Maiden Name)				
Beato, Ma. Rosa De Lima G. ADDRESS Zone G, Brgy. Gnadalya, Baybay City, Legla	Department of Animal Science USU		Science, USU	
Zone a, Brzy. Gnadaluja, Baybay City, Legla	1			
AGE SEX CIVIL	PROPOSED POSITION			1
AGE 27  SEX CIVIL STATUS Married  Report France	Instructor 3			
Pre-Employment Medical-Physical	Tests		The state of the s	
1. Blood Test 2. Urinalysis 3. Chest X-ray 4. Drug Test 5. Neuro-Psychiatric Examination (If	necessary)			
FOR THE PHYSICIAN				
I HEREBY CERITIFY that I have personally examined the above-named individual and found her/him to be physically and medically fit/unfit for employment			Affix Documentary Stamp	
PRINTED NAME/SIGNATURE OF PHYSICIAN  ONCOLOR  MERRY (HRISTL T, SUPNET-GUINOCOR, M.D.  Medical Officer III  License No. 111828	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
OFFICIAL DESIGNATION	HEIGHT (Part of )	WEIGHT	BLOOD TYPE	BP
	(Basefoot)	(Stripped)	u · a	90/4
AGENCY:	DATE EXAMI		•	
VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines	2-3-13			