

MEDICAL CERTIFICATE

For Employment

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) CALIBO Candelario L			AGENCY ADDRESS DOPAC VSU		
ADDRESS DOPAC VSU					
AGE 60	SEX M	CIVIL STATUS S	PROPOSED POSITION Prof 3		
Pre-Employment Medical-Physical Tests					
<ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> Blood Test 2. <input checked="" type="checkbox"/> Urinalysis 3. <input checked="" type="checkbox"/> Chest X-ray 4. <input checked="" type="checkbox"/> Drug Test 5. Neuro-Psychiatric Examination (If necessary) 					
FOR THE PHYSICIAN					
I HEREBY CERTIFY 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 MERRY CHRISTIE L. MEDICINA, M.D. Medical Officer of Health License No. 227573		CERTIFICATE NO.	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
OFFICIAL DESIGNATION			HEIGHT (Barefoot) 170 cm	WEIGHT (Stripped) 80 kg.	BLOOD TYPE AB
AGENCY: VSU HOSPITAL Visayas State University Visca, Baybay, Leyte, Philippines			DATE EXAMINED 1-27-77		