

Republic of the Philippines City of Cagayan de Oro CITY COLLEGE OF CAGAYAN DE ORO Office of the School Clinic



SCHOOL CLINIC HEALTH CERTIFICATE

To whom it may concern:	
This is to certify that, years old, M/F	F,
student/personnel of the City College of Cagayan de Oro, was seen and examined in the	e
School Clinic on	
Impression:	
Recommendation/s:	
Signed by:	
Designation:	

 $\hbox{*Subject for approval from OSAS/Department Head}.$



