

Student's Copy



CAVITE STATE UNIVERSITY-CCAT
Health Services Unit
A.Y. 2022 – 2023
MEDICAL CLEARANCE

Student Control No. «Student_Control_No»

This is to certify that I have personally seen/examined **«Name»** and found him/her to be physically and medically **FIT** to enroll on the **«Program»** program.


MARIE MICHELL G. CASTRO, RN
University Nurse
License No. 0467880

Registrar's Copy



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