School: UNIVERSITY OF BOHOL

Address: DR. CECILIO PUTONG STREET, COGON, TAGBILARAN CITY, BOHOL

Building: FOUNDERS Floor: 2ND Room/Grp No.: F-203

Seat No.	Last Name	First Name	Middle Name	School Attended
1	ALCOVER	CZARINA	LAWAG	VISAYAS STATE UNIVERSITY (for.VISCA,LSU.)- BAYBAY
2	ALFONSO	SARAH JANE	AYUBAN	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
3	ASA	MILLA-ESMERALDA	ORNOPIA	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
4	AURESTILA	MARIECAR	RAMIS	VISAYAS STATE UNIVERSITY (for.VISCA,LSU.)-BAYBAY
5	BALATONG	ANGEL LOVE	TUMABANG	CEBU TECHNOLOGICAL UNIVERSITY-MAIN (for.CSCST)
6	BERMUDEZ	MARILYN	BUNTOG	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
7	BERON	JOHN VENCENT	BOISER	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
8	BETONIO	MYRENE	JINAYON	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
9	CARREOS	MARIA EZRA	ARIG	MINDANAO STATE UNIVERSITY-ILIGAN INSTITUTE OF TECHNOLOGY
10	CUTANG	VANESSE JANE	MONTEALTO	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
11	DERAIN	GERALDINE	DINOY	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
12	DUPIT	SUSAN	DAHAY	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY

REMINDER: USE SAME NAME IN ALL EXAMINATION FORMS. IF THERE IS AN ERROR IN SPELLING AND OTHER DATA KINDLY REQUEST YOUR ROOM WATCHERS TO CORRECT IT ON THE FIRST DAY OF EXAMINATION. REPORT TO YOUR ROOM ON OR BEFORE 6:30 A.M. LATE EXAMINEES WILL NOT BE ADMITTED.

Pursuant to the PRC-DOH-PNP Administrative Order No. 01 dated July 28, 2021, examinees for the licensure examinations are required to submit either (1) a negative RTPCR Test Results, if falling under the groups stated in DOH Memorandum 2020-258A, or (2) a Certification issued by any government or private physician or barangay officer attesting that the examinee had undergone 14-day quarantine prior to the examination, or (3) copy of the Complete Vaccination Card.

School: UNIVERSITY OF BOHOL

Address: DR. CECILIO PUTONG STREET, COGON, TAGBILARAN CITY, BOHOL

Building: FOUNDERS Floor: 2ND Room/Grp No.: F-204

	Last Name	First Name	Middle Name	School Attended
No.	ESTOQUIA	MARIA OPELLA VANESSA		UNIVERSITY OF BOHOL
2	FERNANDEZ	MIGUELITA	LAURENTE	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
3	GULAY	JIZALYN	BETONIO	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
4	GULE	JENNELLE	BERNADAS	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
5	GUMANIT	HANNA GRACE	VAILOCES	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
6	GUMAPAC	LEA	DALAGAN	HOLY NAME UNIVERSITY (for.DIVINE WORD-TAGBILARAN)
7	GUMATAY	RUBELYN	SALAS	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
8	GUNO	CATHIE	SAMON	UNIVERSITY OF BOHOL
9	HINGPIT	RAQUEL	JANDAYAN	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
10	INOJALES	JASMENE	BERONGOY	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
11	JAROMAHUM	VIRGINIA	BERMOY	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
12	LIBAY	AMIE	RANIS	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY

REMINDER: USE SAME NAME IN ALL EXAMINATION FORMS. IF THERE IS AN ERROR IN SPELLING AND OTHER DATA KINDLY REQUEST YOUR ROOM WATCHERS TO CORRECT IT ON THE FIRST DAY OF EXAMINATION. REPORT TO YOUR ROOM ON OR BEFORE 6:30 A.M. LATE EXAMINEES WILL NOT BE ADMITTED.

Pursuant to the PRC-DOH-PNP Administrative Order No. 01 dated July 28, 2021, examinees for the licensure examinations are required to submit either (1) a negative RTPCR Test Results, if falling under the groups stated in DOH Memorandum 2020-258A, or (2) a Certification issued by any government or private physician or barangay officer attesting that the examinee had undergone 14-day quarantine prior to the examination, or (3) copy of the Complete Vaccination Card.

School: UNIVERSITY OF BOHOL

Address: DR. CECILIO PUTONG STREET, COGON, TAGBILARAN CITY, BOHOL

Building: FOUNDERS Floor: 2ND Room/Grp No.: F-205

Seat No.	Last Name	First Name	Middle Name	School Attended
1	LUMAYAG	ALMIRA	BUCIA	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)
2	MACALAM	FRITZIE	CUARTEROS	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
3	MAGALLONES	ANALIZA	QUIMBA	EMILIO AGUINALDO COLLEGE-DASMARIÑAS
4	OPLE	CATHLEEN	MAGLIPONG	UNIVERSITY OF BOHOL
5	PELLAZAR	JASMIN JOY	FELISAN	UNIVERSITY OF THE PHILIPPINES-VISAYAS-ILOILO CITY
6	RACHO	JOSIE MARIBEL	DAG-UM	HOLY NAME UNIVERSITY (for DIVINE WORD-TAGBILARAN)
7	REYES	ANGELENE	MAGDUA	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
8	SAGOSOY	MA LIZA MOHANNA MARIE	NALASA	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
9	SALAZAR	MIRALYN	CRESCENCIO	SAINT PAUL COLLEGE FOUNDATION, INC (CEBUST PAUL COLL)
10	SIMO	IRISH	FERNANDEZ	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
11	SUAREZ	ANALIZA	ARAIS	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY

REMINDER: USE SAME NAME IN ALL EXAMINATION FORMS. IF THERE IS AN ERROR IN SPELLING AND OTHER DATA KINDLY REQUEST YOUR ROOM WATCHERS TO CORRECT IT ON THE FIRST DAY OF EXAMINATION. REPORT TO YOUR ROOM ON OR BEFORE 6:30 A.M. LATE EXAMINEES WILL NOT BE ADMITTED.

Pursuant to the PRC-DOH-PNP Administrative Order No. 01 dated July 28, 2021, examinees for the licensure examinations are required to submit either (1) a negative RTPCR Test Results, if falling under the groups stated in DOH Memorandum 2020-258A, or (2) a Certification issued by any government or private physician or barangay officer attesting that the examinee had undergone 14-day quarantine prior to the examination, or (3) copy of the Complete Vaccination Card.

School: UNIVERSITY OF BOHOL

Address: DR. CECILIO PUTONG STREET, COGON, TAGBILARAN CITY, BOHOL

Building: DIAMOND Floor: 1ST Room/Grp No.: GSD

103

Seat	Last Name	First Name	Middle Name	School Attended
1	DALOGDOG	JUANITA	BUSILAK	NORTHEASTERN MINDANAO COLL.

REMINDER: USE SAME NAME IN ALL EXAMINATION FORMS. IF THERE IS AN ERROR IN SPELLING AND OTHER DATA KINDLY REQUEST YOUR ROOM WATCHERS TO CORRECT IT ON THE FIRST DAY OF EXAMINATION. REPORT TO YOUR ROOM ON OR BEFORE 6:30 A.M. LATE EXAMINEES WILL NOT BE ADMITTED.

Pursuant to the PRC-DOH-PNP Administrative Order No. 01 dated July 28, 2021, examinees for the licensure examinations are required to submit either (1) a negative RTPCR Test Results, if falling under the groups stated in DOH Memorandum 2020-258A, or (2) a Certification issued by any government or private physician or barangay officer attesting that the examinee had undergone 14-day quarantine prior to the examination, or (3) copy of the Complete Vaccination Card.