

School : UNIVERSITY OF BOHOL

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

Building : HIGH SCHOOL			Floor : 2ND	Room/Grp No. : ROOM 201		
Seat No.	Seat Last Name First Name Middle Name		School Attended			
1	ACERON	LESTER JUNE	BALABA	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA	
2	ALBARACIN	ANITA	MARINDUQUE	UNIVERSITY O	UNIVERSITY OF BOHOL	
3	AMORA	MINKIE	SABALANDE		BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY	
4	ANDOLERO	JAIMES IAN	ALCANTARA	BOHOL INSTIT	UTE OF TECHNOLOGY-TALIBON	
5	ANIANA	VERNISSA	APARRE	NORTHERN CE	EBU COLLEGE	
6	ANUNCIADO	CHARLINE JOY	CABIGAS	BATUAN COLL	EGES INC.	
7	ARO	CRISPOLO JR	CAMAÑERO	BATUAN COLL	BATUAN COLLEGES INC.	
8	AUGUIS	MERIGEN	JABAY		UNICIPAL COLLEGE (for. NG BAYAN NG SAN MATEO)	

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 : I	HIGH SCHOOL
--------------	-------------

Floor : 2ND Room/Grp No. : ROOM 202

				202
Seat	Last Name	First Name	Middle Name	School Attended
No.				
1	AUSTRIA	RODERICK	CARMELOTES	TRINIDAD MUNICIPAL COLLEGE
2	AUXTERO	FREZEL	ABAPO	TRINIDAD MUNICIPAL COLLEGE
3	AUZA	LIEZEL	CALDAMO	TRINIDAD MUNICIPAL COLLEGE
4	AVENIDO	EVENITA	MERCADO	UNIVERSITY OF BOHOL
5	AVENIDO	HANNAH JEAN	MARGATINEZ	UNIVERSITY OF SOUTHERN PHILIPPINES
6	BAAY	ERIC	GALVE	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-BILAR
7	BAGUHIN	HAZEL	RONTAL	BOHOL INSTITUTE OF TECHNOLOGY-TALIBON
8	BAHILOT	MYLYN	MIGUELES	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-TAGBILARAN

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 :	HIGH SCHOOL
------------	-------------

LEET, COGON, TAGBILARAN CH	IY, BOHOL	
	Floor: 2ND	Room/Grp No. : ROOM 203

				200
Seat	Last Name	First Name	Middle Name	School Attended
No.				
	BALANSAG	JANET	SINGCO	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)
2	BALDON	MARIA JOANA	CAIPANG	UNIVERSITY OF BOHOL
3	BALUCA	MA. EVELYN	LICONG	BOHOL INSTITUTE OF TECHNOLOGY- TAGBILARAN CITY
1	BASAN	APRIL ROSE	HORCERADA	CRISTAL e-COLLEGE-PANGLAO CAMPUS
5	BERNADEZ	BEVERLY	VELASCO	BOHOL NORTHERN STAR COLLEGE
6	BONIEL	DIVINA	PUROG	TRINIDAD MUNICIPAL COLLEGE
7	BONIOR	EVELYN	JABINES	TRINIDAD MUNICIPAL COLLEGE
8	BORROMEO	MONICA KEITH	ALLANIC	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)

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 : HIGH SCHOOL			Floor: 2ND	Room/Grp No. : ROOM 204		
Seat	Last Name	First Name	Middle Name	School Atte	nded	
No.						
1	BOYONAS	MARLYN	AUGUIS	BOHOL NORTH	HERN STAR COLLEGE	
2	BUÑAO	ANALYN	BERDON	BATUAN COLL	BATUAN COLLEGES INC.	
3	CABILLA	JUDIE-AN	SUMALINOG	TRINIDAD MUN	TRINIDAD MUNICIPAL COLLEGE	
4	CADELIÑA	AIKO	CAGAS	HOLY NAME U TAGBILARAN)	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)	
5	CADERAO	CHERYL MARIE	DECENA		BOHOL INSTITUTE OF TECHNOLOGY- TAGBILARAN CITY	
6	CAGAS	BERLYN GRACE	SAJOL	UNIVERSITY C	OF BOHOL	
7	CAJES	NIÑA	GURREA	TRINIDAD MUN	NICIPAL COLLEGE	

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	;	HIGH SCHOOL
----------	---	-------------

Building : HIGH SCHOOL			Floor: 2ND	Room/Grp No. : ROOM 205	
Seat	Last Name	First Name	Middle Name	School Atte	nded
No.					
1	CAMBARIJAN	RUFA	PEQUIT	BOHOL INSTIT TAGBILARAN (UTE OF TECHNOLOGY- NTY
2	CAÑETE	MICKY	CAÑADA	TRINIDAD MUN	IICIPAL COLLEGE
3	CORONEL	RIMON	UNAJAN	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-BILAR	
4	CRISTAL	LIEGEN MAE	BUTAWAN	TRINIDAD MUN	IICIPAL COLLEGE
5	CURIBA	SHEILLA MAE	OLASIMAN	BOHOL ISLAND (FOR.CVSCAF) STATE UNIVERSITY I)-BILAR
6	CUYNO	JOY	TUYOGON	BOHOL NORTH	IERN STAR COLLEGE
7	DELA CERNA	NANETH	LORETO	TRINIDAD MUN	IICIPAL COLLEGE

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 : HIGH SCHOOL	-	Floor : 2ND		
Seat Last Name	First Name	Middle Name	School Atten	ded

No.				
1	DIGAL	LENNON	SAGUING	BOHOL INSTITUTE OF TECHNOLOGY-CARMEN
2	DUMARAN	REJANE	MUNDAS	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CALAPE
3	EDAO	ANGELIE	CAMPOSO	BOHOL INSTITUTE OF TECHNOLOGY- TAGBILARAN CITY
4	ENSENDENCIA	MIE		UNIVERSITY OF BOHOL
5	ESCAÑO	ANGIE		TRINIDAD MUNICIPAL COLLEGE
6	ESMEDINA	JESSA MARIE	LADAGA	BOHOL INSTITUTE OF TECHNOLOGY-JAGNA
7	ESTOLOGA	MISHELLE	SOCIAS	CRISTAL e-COLLEGE-PANGLAO CAMPUS

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.

Failure to present either of the three health safety documentary requirements, shall prohibit the examinee to enter the examination premises and to take the licensure examinations.

Room/Grp No. : ROOM

206



School : UNIVERSITY OF BOHOL

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

Building : HIGH SCHOOL			Floor : 2ND	Room/Grp No. : ROOM 207		
Seat No.	Seat Last Name First Name Middle Name No.			School Attended		
1	EVANGELISTA	MARGIE	TURTOGA	BOHOL INSTIT	UTE OF TECHNOLOGY-TALIBON	
2	FUEGO	REYKING	CUBELO	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA	
3	FUENTES	ROSEMARIE	BONCALES	TRINIDAD MUN	IICIPAL COLLEGE	
4	FUROG	GLAIZA	GEPITULAN	TRINIDAD MUN	IICIPAL COLLEGE	
5	GABISAN	JOAN BERNADETTE	PELAYO	BOHOL NORTH	IERN STAR COLLEGE	
6	GABISAN	RONELYN	PLATAN	TRINIDAD MUN	IICIPAL COLLEGE	
7	GEOLAGON	LEONILA	SAMSON	HOLY NAME U TAGBILARAN)	NIVERSITY (for.DIVINE WORD-	

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

CHERRY MAE

Building : I	HIGH SCHOOL
--------------	-------------

I ABRADOR

7

Building : HIGH SCHOOL			Floor: 2ND	Room/Grp No. : ROOM 208			
	Last Name	First Name	School Atte	nded			
No.							
1	GOMEZ	AGNES	BONTOG	BATUAN COLL	EGES INC.		
2	GOMORA	SARAH JANE	JOSOL	HOLY NAME U TAGBILARAN)	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)		
3	GONDONG	CHARLENE	SECOTITO		BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-TAGBILARAN		
4	IGHOT	ANALYN	SIMBIT	UNIVERSITY C	OF BOHOL		
5	INGKING	ANGEL ANNE	RUBEN	BOHOL WISDO	BOHOL WISDOM COLLEGE		
6	JEVEROLA	PERLIE	LANGAMON		D STATE UNIVERSITY T)-TAGBILARAN		

BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-TAGBILARAN

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.

DF VFRA

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 : HIGH SCHOOL			Floor: 2ND	Room/Grp No. : ROOM 209	
Seat	Last Name	First Name	School Attended		
No.					
1	LADESMA	LENJEAN	NARCISO	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA
2	LADESMA	ROWENA	SALVA	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA
3	LADICA	ANTHONY	CUTILLAS	BOHOL NORTH	HERN STAR COLLEGE
4	LADIO	MARY ROSE		BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA
5	LANGAMEN	EMILIE	ANIEL	BOHOL INSTIT TAGBILARAN (UTE OF TECHNOLOGY- CITY
6	LARIOSA	JOLWENA	FORTUNA	TRINIDAD MUN	NICIPAL COLLEGE
7	LINAWAN	JANAICA JOY	CUTARRA	BOHOL INSTIT	UTE OF TECHNOLOGY-TALIBON

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	:	HIGH SCHOOL
----------	---	-------------

Floor : 2ND Room/Grp No. : ROOM 210

				210
Seat	Last Name	First Name	Middle Name	School Attended
No.				
1	LLEMIT	MARYANN	SAJULGA	BOHOL INSTITUTE OF TECHNOLOGY-JAGNA
2	LOFRANCO	VENUS	TORREMOCHA	TRINIDAD MUNICIPAL COLLEGE
3	LUDEVISE	MIRIAM EVE	CAJES	TRINIDAD MUNICIPAL COLLEGE
4	LUDIVESE	NERESA	LEDESMA	MANDAUE CITY COLLEGE- MANDAUE CITY, CEBU
5	LUMAAD	JYLUZ	SINON	BOHOL INSTITUTE OF TECHNOLOGY- TAGBILARAN CITY
6	MACA	CLIFFORD	ANINO	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)
7	MACARAT	MAE SUCEMA SHEENA	ALVAREZ	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CALAPE

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)L

Building :	HIGH	SCHOO
------------	------	-------

Floor: 2ND Room/Grp No. : ROOM

				211
Seat	Last Name	First Name	Middle Name	School Attended
No.				
1	MACATO	DESIREE		BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CANDIJAY
2	MADRONERO	DIODESA	OCADO	UNIVERSITY OF CEBU-BANILAD
3	MALIMOT	LADYBE	SALPUCIAL	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-TAGBILARAN
1	MATU-OD	CARMINA ROSE		UNIVERSITY OF BOHOL
5	MELANIO	INA	GAMAY	CRISTAL e-COLLEGE-PANGLAO CAMPUS
6	MENDEZ	JENNIFER	TAMBULI	BOHOL NORTHERN STAR COLLEGE
7	MENDEZ	MA. LANI	SILOMEN	TRINIDAD MUNICIPAL COLLEGE

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 : HIGH SCHOOL				Floor: 2ND	Room/Grp No. : ROOM 212
Seat Last Name First Name Middle Name No.				School Attended	
1	MIMBRILLOS	DIOSCORO	MERONTOS	TRINIDAD MUN	IICIPAL COLLEGE
2	MISA	MERCEDES	DOROY	UNIVERSITY O	F BOHOL
3	MURING	PRINCESS	DUYOG	BOHOL ISLANE (FOR.CVSCAFT	D STATE UNIVERSITY T)-CANDIJAY
4	MUSICO	DARLENE	MENDOZA	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA
5	OCLARIT	SWITZEL	EDUBAS	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA
6	OCON	CHRISTINE JOYCE	BALACY	TRINIDAD MUN	IICIPAL COLLEGE
7	OCON	MIKEE	BARQUILLA	TRINIDAD MUN	IICIPAL COLLEGE

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	:	HIGH SCHOOL
----------	---	-------------

Floor : 3RD Room/Grp No. : ROOM

				301
Seat No.	Last Name	First Name	Middle Name	School Attended
1	OLAGUIR	MELANIE	AGUINID	BOHOL WISDOM COLLEGE
2	OMBAYAN	DALIA	OYANGORIN	BOHOL INSTITUTE OF TECHNOLOGY-CARMEN
3	OMOLON	MAE ANN	MUMAR	TRINIDAD MUNICIPAL COLLEGE
4	OMOSURA	CATHERINE	ASILUM	HINATUAN SOUTHERN COLLEGE (for.USP)
5	ORIGENES	MONALIZA	DANGEL	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CALAPE
6	OROYAN	DESSA JEAN	BUNADO	TRINIDAD MUNICIPAL COLLEGE
7	OYANGORIN	AIRES	BORADO	BOHOL INSTITUTE OF TECHNOLOGY-CARMEN

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

HYRENE

Building : HIGH SCHOOL

PEÑAFLOR

7

Build	ling : HIGH SCHOO	DL	Floor : 3RD	Room/Grp No. : ROOM 302	
Seat	Last Name	First Name	Middle Name	School Atte	nded
No.					
1	OYANGORIN	LAILA	AMPARO	BOHOL INSTIT	UTE OF TECHNOLOGY-CARMEN
2	PAGASIAN	BLESSEL GRACE	VILLAGONZA	TRINIDAD MUN	IICIPAL COLLEGE
3	PAHUNANG	SHARMAINE	ABREA	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA
4	PALANCA	ANNA MARIE	ACQUIATAN	PROFESSIONA	L ACADEMY OF THE PHILIPPINES
5	PARINASAN	WINDY	DE LA TORRE	MATER DEI CC	DLLEGE-BOHOL
6	PELONIA	APRIL MARY GEL	BUMOTAD	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA

TRINIDAD MUNICIPAL COLLEGE

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.

HASPE

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 : HIGH SCHOOL			Floor : 3RD	Room/Grp No. : ROOM 303	
•••••	Seat Last Name First Name Middle Name		School Attended		
No.					
1	PESA	ANVIE	CRISTAL	TRINIDAD MUN	NICIPAL COLLEGE
2	PINOLIAD	REYNANTE	CILA	WESTERN MINDANAO STATE U-ZAMBOANGA CITY	
3	POLOT	JANE ANGELO	LIMBAGA	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-TAGBILARAN	
4	PUDE	GLADYS	LARIOS	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-TAGBILARAN	
5	QUIROL	CHARLIE	RIO	BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-CALAPE	
6	RAMOS	MARY GRACE	AUXTERO	TRINIDAD MUN	NICIPAL COLLEGE
7	ROMANO	GERTERLYN	GALENDEZ	BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA

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 : HIGH SCHOOL			Floor : 3RD	Room/Grp No. : ROOM 304		
Seat	at Last Name First Name Middle Name		School Attended			
No.						
1	ROSALES	MICHELLE	CABALAN	TRINIDAD MUN	TRINIDAD MUNICIPAL COLLEGE	
2	SAGOSOY	FLORDELIZA	NALASA		BOHOL INSTITUTE OF TECHNOLOGY- TAGBILARAN CITY	
3	SALISE	MARICEL	BETE		BUKIDNON STATE UNIVERSITY(FOR.BUKIDNON STATE COLLEGE)-MAIN CAMPUS	
4	SALVA	MA. CARMIE	GALIA	BOHOL INSTITUTE OF TECHNOLOGY-JAGNA		
5	SAMPITAN	ELSIE	PAGULON		BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-TAGBILARAN	
6	SASTRE	LIEZEL	ZAMORAS	JOSE RIZAL ME DIPOLOG CAMI	EMORIAL STATE UNIVERSITY - PUS	
7	SEBLA	ANGELYN	PINO	BOHOL INSTITU	JTE OF TECHNOLOGY-JAGNA	

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 : HIGH SCHOOL			Floor : 3RD		
Seat Last Name	First Name	Middle Name	School Attended		

No.				
1	SOBIOR	MARY ANN	OTARRA	BLESSED TRINITY COLLEGE
2	TABIGUE	LOUISE	OPONDA	TRINIDAD MUNICIPAL COLLEGE
3	TADLAS	JOCELYN	AÑORA	BOHOL INSTITUTE OF TECHNOLOGY-JAGNA
4	TAGAILO	JAYMAIEMA	JUSTINIANE	TRINIDAD MUNICIPAL COLLEGE
5	TAGUPA	JEHSSA MAE	NISNISAN	BOHOL WISDOM COLLEGE
6	TORCENDE	MARIA TERESA	CORNESIO	TRINIDAD MUNICIPAL COLLEGE
7	TORREGOSA	DINAH	LABAGRIEL	BUENAVISTA COMMUNITY COLLEGE

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.

Failure to present either of the three health safety documentary requirements, shall prohibit the examinee to enter the examination premises and to take the licensure examinations.

Room/Grp No. : ROOM

305



School : UNIVERSITY OF BOHOL

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

Building : HIGH SCHOOL			Floor: 3RD	Room/Grp No. : ROOM 306		
	Seat Last Name First Name Middle Name		School Attended			
No.						
1	TORRENUEVA	ALEJANDRA	SOCOBOS		BOHOL ISLAND STATE UNIVERSITY (FOR.CVSCAFT)-BILAR	
2	TUMILAP	VINA	ELIGAN	BOHOL INSTIT	BOHOL INSTITUTE OF TECHNOLOGY-TALIBON	
3	TUSOY	ILYN	CABANIG	BOHOL INSTIT	BOHOL INSTITUTE OF TECHNOLOGY-CARMEN	
4	VALMORIA	RIZA	DIABORDO	BOHOL NORTHERN STAR COLLEGE		
5	VILLAREN	CARLA	ESCABARTE	HOLY NAME U TAGBILARAN)	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)	
6	VIRADOR	FLORA MAE		BOHOL INSTIT	UTE OF TECHNOLOGY-JAGNA	
7	YEE	MARY JOY	VENTE	REPUBLICAN	COLLEGE	

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.