

TO BE ACCOMPLISHED
PERSONALLY BY THE
PROFESSIONAL



Republic of the Philippines
Professional Regulation Commission
Manila

PRC REG Form No. 003 (Rev. Sept 2002)

- RENEWAL
- DUPLICATE
- REPRINT
- CHANGE OF NAME

APPLICATION FOR PROFESSIONAL IDENTIFICATION CARD

Paste here
your recent
PASSPORT SIZE
colored picture in
white background with
complete name tag

NAME: _____, _____
Last Name First Name Middle Name

PERMANENT MAILING ADDRESS: _____

DATE FILED: _____ **PROFESSION:** _____ **EXAM DATE:** _____
(mm/dd/yy) (mm/dd/yy)

REGISTRATION DATE: _____ **LICENSE NO.:** _____ **EXPIRATION DATE:** _____
(mm/dd/yy) (mm/dd/yy)

CITIZENSHIP: _____ **BIRTH DATE:** _____ **TEL. No./CP No.:** _____
(mm/dd/yy)

This is to certify that all the information above are true and correct.

SIGNATURE OF LICENSEE

FOR PRC PROCESSING

YLP FROM: _____ TO: _____ P/ _____	SURCHARGE: _____	Amount: _____	O.R. No. : _____
VERIFIED AND ASSESSED BY: _____	TOTAL AMOUNT: _____	Date: _____	Issued by: _____

PLEASE FILL OUT THIS CLAIM SLIP

ID CLAIM SLIP

ISSUED BY: _____

DATE FILED: _____

NAME:	AMOUNT
PROFESSION:	OR NO.
LICENSE NO.	DATE PAID
APPLICATION TYPE: <input type="checkbox"/> RENEWAL <input type="checkbox"/> DUPLICATE <input type="checkbox"/> REPRINT <input type="checkbox"/> CHANGE OF NAME	

Please present this slip to claim your professional ID on _____ at Window _____.

(NOTE: REPRESENTATIVE WITH PROPER IDENTIFICATION SHOULD PRESENT SPECIAL POWER OF ATTORNEY/AUTHORIZATION LETTER FROM THE REGISTERED PROFESSIONAL AND THIS ORIGINAL CLAIM SLIP.) FOR CONFIRMATION PLEASE CALL UP (02) 736-22-48.

PROCEDURES

- Step 1.** Present duly accomplished form together with the requirements at Assessment Windows
Window 17 Window 18 Window 30
- Step 2.** Pay prescribed fees at the Cashier. (Windows 33, 34 and 35)
- Step 3.** Get your claim slip at Windows 17, 18 and 30
- Step 4.** Claim your professional license as scheduled. Please refer to your claim slip for further instructions.

REQUIREMENTS

1. Duly accomplished form
2. Two (2) pcs passport size picture: close up, colored, white background with complete name tag
3. Photo/xerox copy of recent professional ID card
4. In case of **LOST** professional ID card which is still current, the applicant shall submit notarized **Affidavit of Loss**
5. In case of **DESTROYED** professional ID card, the applicant shall surrender the destroyed card

NOTE : As the authorized representative, I assume direct and full responsibility/liability for the security of the professional ID.

Signature over Printed Name of REPRESENTATIVE