

### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Dulla	ing :			Floor: 6TH	Room/Grp No.: 1
Seat No.	eat Last Name First Name Middle Name o.		School Attended		
1	ABATAYO	MARIEL	DIANO	CEBU DOCTOR	RS UNIVERSITY
2	ABDULKARIM	BAI NAHLA	UTTO	DR. P. OCAMPO COLLEGES	
	ACAB	SHARLYN	CATAYLO	SILLIMAN UNIVERSITY	
•	ACASO	DANNICA ROSE		SOUTHWESTE	RN UNIVERSITY
l.	ACHA	MARY ELIZABETH	DEL CASTILLO	VELEZ COLLEG	GE
l.	ACOSTA	ANGELICA	MOLINA	SILLIMAN UNIV	ERSITY
,	AGUILAR	REGOR	ELCARTE	SOUTHWESTERN UNIVERSITY	
3	ALBA	JIREH BEA	UDAL	SILLIMAN UNIV	

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### ADDITIONAL REQUIREMENTS

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1. NPS/OPS RT-PCR from DOH-accredited Molecular Laboratories taken 72 hours prior to scheduled examination;

OR

2. Antigen testing from DOH-accredited Laboratories 24 hours prior to the scheduled examination.

### For FULLY vaccinated examinees:

1. Original and 1 photocopy of Vaccination Card

Informed Consent (Annex A): https://bit.ly/3xirnZT

Health Declaration Form (Annex B): https://bit.ly/3rMluTz

Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): <u>https://bit.ly/3HhNMNd</u>

- ✓ The 14-Day Quarantine Certificate is NO longer applicable.
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Bullu	ing .			Floor: 6TH	Room/Grp No.: 2
Seat	Last Name First Name Middle Name		School Attended		
No.					
1	ALCALA	CHRISTINE ANN	IRAN	VELEZ COLLEG	E
2	ALCANTARA	ALEXIA	ROBISO	VELEZ COLLEG	θE
3	AMAMIO	MIKYLA	MACELLONES	SOUTHWESTER	RN UNIVERSITY
4	AMISOLA	SHALAH ELAINE	PILA	MEDINA COLLE	GE-OZAMIS CITY
5	AMISTAD	FRITZIE MAE	POGOY	VELEZ COLLEG	E
6	APRODA	MARIAH KRISTINE	YANOLA	SOUTHWESTER	RN UNIVERSITY
7	APSAY	NICOLE KIMBERLY	RECALDE		FATIMA UNIVERSITY-VALENZUELA
8	ARBOLENTE	DIANA NOELLE	BUNAO		IVERSITY (for.DIVINE WORD-

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Duila	ing :			Floor: 6TH	Room/Grp No.: 3	
Seat No.	Thist Name Mildule Name		School Attended			
1	ARCENAL	GLENN CARLO HENLEY	ABORDO			
0				CEBU DOCTOR	IS UNIVERSITY	
2	ASUNTO	ZAIRAH MAY	MACAPANGAL	SOUTHWESTE	RN UNIVERSITY	
3	ATIS	LAILENE	CASTILLON	MEDINA COLLE HOSP.& COLL.)	GE-PAGADIAN (for.ST.JOHN GEN.	
4	AUGUSTO	CHRISMAYE LYLE	CAVADA	OUR LADY OF I	FATIMA UNIVERSITY-VALENZUELA	
5	AUNZO	EDLLENE MICHELLE	SAGAYNO	SILLIMAN UNIV	ERSITY	
6	AVENIO	RUBY	GERIAN	SILLIMAN UNIV	ERSITY	
7	BACUS	MOIRA KEI	APARRI	VELEZ COLLEG	VELEZ COLLEGE	
8	BAEL	KYLE CHRISTIAN	SEMBRANO		DIPOLOG MEDICAL CENTER COLLEGE FOUNDATION, INC	

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Build	ing :			Floor: 6TH	Room/Grp No. : 4
Seat No.	eat Last Name First Name Middle Name		School Attended		
Ĺ	BAGSICAN	ERMELYN FAE	SABLAS	ILOILO DOCTO	ORS' COLLEGE
2	BALOGBOG	NICA	TIRO	SOUTHWESTERN UNIVERSITY	
3	BATINGAL	SHARLENE	RAPEL	SOUTHWESTERN UNIVERSITY	
1	BATOCTOY	JEWEL DIME	LLANOS	VELEZ COLLEC	GE
5	BAUTISTA	MARY JOY	SOROÑO	SOUTHWESTE	RN UNIVERSITY
5	BAUTISTA	RACHELLE ANN	LACSON	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)	
7	BENDEBEL	MEIRA LEE	YNTIG	SOUTHWESTE	RN UNIVERSITY
3	BILOY	LINDY GRACE	SUMANAL	SOUTHWESTE	RN UNIVERSITY

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Build	ing :			Floor: 6TH	Room/Grp No. : 5
Seat No.	Seat Last Name First Name Middle Name		School Attended		
1	BINARAO	VALERIE	LAPING	SOUTHWESTE	RN UNIVERSITY
2	BINATERO	ABIGAIL	PONPON	SILLIMAN UNIV	/ERSITY
3	BINONDO	SHANIA DANIELLE	ODTOHAN	SOUTHWESTE	RN UNIVERSITY
4	BIRAO	ALOHA VIE	JUQUITON	OUR LADY OF	FATIMA UNIVERSITY-VALENZUELA
5	BISNAR	JAMIELLE	KIRONG	VELEZ COLLEC	GE
6	BITERA	PAMELA MAE	ODULIO	VELEZ COLLEC	GE
7	BORJA	KATRINA REBECCA	TAN	UNIVERSITY O MEM MEDICAL	F THE EAST RAMON MAGSAYSAY CTR
8	BUCIO	ANGELIQUE ROSE		HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-

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FLAMMA OTH

### School : CEBU DOCTORS' UNIVERSITY

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School Attended
HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)
HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)
SOUTHWESTERN UNIVERSITY
HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)
VELEZ COLLEGE
HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)
CEBU DOCTORS UNIVERSITY
HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)

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Build	ing :			Floor: 6TH	Room/Grp No.: 7
Seat Last Name First Name Middle Name Sch No.		School Atte	School Attended		
1	CAGULADA	BEN DAVID	MENDOZA	HOLY NAME U TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
2	CAJES	MARIA LISSETTE	AURESTILA	HOLY NAME UNIVERSITY (for.DIVINE WOR TAGBILARAN)	
3	CALATRAVA	DARREN	VILLANUEVA	CEBU DOCTO	RS UNIVERSITY
1	CALE	BIANCA MARIE	URSAL	VELEZ COLLE	GE
5	CALO	MARY THERESE ANGELI	QUICHO	VELEZ COLLE	GE
5	CAMBALON	JEBETH DANE	MARTINEZ	HOLY NAME U TAGBILARAN)	INIVERSITY (for.DIVINE WORD-
7	CAMINERO	LEICYL	CATUBIG	SOUTHWESTE	ERN UNIVERSITY
8	CAPANGPANGAN	CATHY	YATA	SOUTHWESTE	ERN UNIVERSITY

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Build	ing :			Floor: 6TH	Room/Grp No.: 8
Seat	eat Last Name First Name Middle Name Sch		School Atter	nded	
No.					
1	CAPAPAS	JASON MARK	SOLIDUM	SOUTHWESTE	RN UNIVERSITY
2	CAPULONG	MARY JANE	BUNA	SILLIMAN UNIV	ERSITY
3	CARERAS	PRINCES ZASPER	REQUILLO	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
4	CASEÑAS	CELINE JUNE	TAN	SOUTHWESTE	RN UNIVERSITY
5	CASINILLO	ROI	ARRIESGADO	OUR LADY OF	FATIMA UNIVERSITY-VALENZUELA
6	CENIZA	JANELLE	PONAY	OUR LADY OF	FATIMA UNIVERSITY-VALENZUELA
7	CHIONG	CATHERINE ROSE	VILLENA	CEBU DOCTOR	RS UNIVERSITY
8	CHIU	CHARLES	MAGSAYO	ILIGAN MEDICA	AL CENTER COLLEGE, INC.

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Build	ing :			Floor:6TH	Room/Grp No. : 9
Seat No.	industrial institution institution		Middle Name	School Atter	nded
1	CHIU	VIVIEN MARTHA	PEREZ	HOLY NAME UN TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
2	CHUA	SAMANTHA KATE	CATALAN	SILLIMAN UNIV	ERSITY
3	CODILLA	AIKO	BASALO	HOLY NAME UN TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
4	COLLANTE	KAYE	BARTOLABAC	VELEZ COLLEG	BE
5	CORVERA	REXELLE MARIE	PELINGON	SOUTHWESTER	RN UNIVERSITY
6	COSEP	KRISTINE ANN	REDONDO	CEBU DOCTOR	RS UNIVERSITY
7	CUTHING	JEV	CELERINOS	DIPOLOG MEDI FOUNDATION,	ICAL CENTER COLLEGE
8	DACLAN	VALERIE ASHLEY	REGIS	OUR LADY OF I	FATIMA UNIVERSITY-VALENZUELA

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Build	ing :			Floor: 6TH Room/Grp No.: 10
Seat No.	Seat Last Name First Name Middle Name		School Attended	
1	DAGONDON	ELAINE	YBAÑEZ	SOUTHWESTERN UNIVERSITY
2	DAGONDON	TRIXIA	YBAÑEZ	SOUTHWESTERN UNIVERSITY
3	DAJALOS	ZACHARY	GALBO	MEDINA COLLEGE-OZAMIS CITY
4	DE LEON	TRISHA MAE	YPANTO	SOUTHWESTERN UNIVERSITY
5	DICO	BERNIE JOEFRIE	PAHUGOT	DIPOLOG MEDICAL CENTER COLLEGE FOUNDATION, INC
6	DIMPAS	PATRICK EMMANUEL	ANGUS	VELEZ COLLEGE
7	DOGUILES	DANA ROJENNE	ATUP	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)
8	DULATRE	MISSY MADONNA	SALABE	UNIVERSIDAD DE ZAMBOANGA (for.ZAEC)

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Build	ing .			Floor: 6TH	Room/Grp No.: 11
Seat No.	Instituatie Middle Name		School Attended		
10.	DURANGO	VINCE ROSETTE	MIRAFLOR	0	
	EDEROSAS	KARL SHEEN	MARABE	SILLIMAN UNIV	
	EJIDA	SOFIA MARIE	BACUS	MISAMIS UNIVERSITY-OZAMIS CITY SOUTHWESTERN UNIVERSITY	
	EMPEYNADO	JOANNA FE	BANLAT	SILLIMAN UNIV	
	ENGLATERRA	KRISHA MARIE	CALACAR	SOUTHWESTE	RN UNIVERSITY
	ENGLISA	RAS MILES	PATATAG	SOUTHWESTEI	RN UNIVERSITY
·	ESCOBER	JOHN MICHAEL	PILAPIL		FATIMA UNIVERSITY-VALENZUEL
3	ESPALTERO	JESSA	BACLAYON	CEBU DOCTOR	

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Dunu				Floor: 6TH	Room/Grp No.: 12
Seat No.	Last Name	ast Name First Name	Middle Name	School Attended	
1	ESTACA	CARLO	PADILLA	SOUTHWESTER	RN UNIVERSITY
2	ESTRERA	FRANCES MARIE	ZAMORA	HOLY NAME UNIVERSITY (for.DIVINE WORD- TAGBILARAN)	
3	FALSARIO	YLA GENEVIEVE	ZAPANTA	OUR LADY OF F	ATIMA UNIVERSITY-VALENZUELA
4	FLANCO	ANDREE SOFIA	DOLLIZON	HOLY NAME UNIVERSITY (for.DIVINE WORD TAGBILARAN)	
5	FONTANOSA	RONA ALEXIS	SUN	VELEZ COLLEG	F
5	FUENTES	<b>BLIGHT CHARI</b>	ARON	SOUTHWESTER	
7	GALIMBA	FLORENCE CYRIL	FUA		
3	GAMAY	CAMILLE		VELEZ COLLEG	TSU2
		CAMILLE DAGASDAS	DAGASDAS	HOLY NAME UNIVERSITY (for.DIVINE WORD TAGBILARAN)	

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Build	ing :			Floor: 6TH	Room/Grp No. : 13
Seat	eat Last Name First Name Middle Name		Middle Name	School Attended	
No.					
	GAMUTAN	MAURIE BETH	MENDOZA	CEBU DOCTOR	RS UNIVERSITY
	GARAYGAY	LEA	TOCMO	SILLIMAN UNIV	/ERSITY
	GAYAS	LYNNE JANE	GESTA	SOUTHWESTE	RN UNIVERSITY
	GEMILISAWAN	JAMES BRYAN	-	SOUTHWESTE	RN UNIVERSITY
	GESON	GLAIZE JANE	LOREJAS	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
	GICA	MARIBEL	MABUYAO	DIPOLOG MED FOUNDATION,	ICAL CENTER COLLEGE
7	GICALE	MARIA IVANNE	INOT	SOUTHWESTE	RN UNIVERSITY
3	GODINEZ	MILES	TUTOR	SOUTHWESTE	RN UNIVERSITY

**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.

#### ADDITIONAL REQUIREMENTS

#### For all unvaccinated / partially vaccinated examinees:

1. NPS/OPS RT-PCR from DOH-accredited Molecular Laboratories taken 72 hours prior to scheduled examination;

OR

2. Antigen testing from DOH-accredited Laboratories 24 hours prior to the scheduled examination.

### For FULLY vaccinated examinees:

1. Original and 1 photocopy of Vaccination Card

Informed Consent (Annex A): https://bit.ly/3xirnZT

Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): <u>https://bit.ly/3HhNMNd</u>

- ✓ The 14-Day Quarantine Certificate is NO longer applicable.
- ✓ Failure to bring any of the above-mentioned requirements will not be allowed to take the Licensure Examination.
- ✓ LGU Travel requirements are different from our mandatory requirement



#### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ing :			Floor: 6TH	Room/Grp No.: 14
	eat Last Name First Name Middle Name		School Attended		
No.					
1	GOMIAL	JENA MAE	PALTINCA	SILLIMAN UNI	/ERSITY
2	GONGOB	RHODA LEE	LEONAR	SILLIMAN UNIN	/ERSITY
3	GORDONCILLO	ETHYL MAE	TABIO	SILLIMAN UNI	
ł	GRAN	JUDY ANN		THE FAMILY C	LINIC, INC.
5	GRIFFITHS	QUEENIE MAE	ALVAREZ		NIVERSITY (for.DIVINE WORD-
5	GUMAPAC	MARIAN EVE	OREVILLO	SOUTHWESTE	RN UNIVERSITY
1	GURO	SITTIE SUMAYYA	GURO		AL CENTER COLLEGE, INC.
3	HERRERA	ARA BEANCA	ARCENA		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.

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OR

2. Antigen testing from DOH-accredited Laboratories 24 hours prior to the scheduled examination.

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1. Original and 1 photocopy of Vaccination Card

Informed Consent (Annex A): https://bit.ly/3xirnZT

Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): <u>https://bit.ly/3HhNMNd</u>

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- ✓ Failure to bring any of the above-mentioned requirements will not be allowed to take the Licensure Examination.
- ✓ LGU Travel requirements are different from our mandatory requirement



### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ing :			Floor: 6TH	Room/Grp No. : 15
Seat No.	eat Last Name First Name Middle Name		Middle Name	School Attended	
1	IBARRA	FHASHIERRE GENNEREICH	ABANGGAN	HOLY NAME U TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
2	IGNACIO	JESSA MHEL	DIAZ	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
3	ILUSTRISIMO	KATHRINA MARIE	DEJA	DIPOLOG MED FOUNDATION,	ICAL CENTER COLLEGE
<i>a</i>	INVENTO	JIM RYAN	FAJARDO	SOUTHWESTE	RN UNIVERSITY
5	ISOLA	ADRIAN	AVENIDO	SOUTHWESTE	RN UNIVERSITY
5	JAMERO	SHANINA GRACE	AGUIMAN		FATIMA UNIVERSITY-VALENZUELA
,	JAMIRO	HANNA CHARISMA	MIRAMONTES		RN UNIVERSITY
3	JARINA	JAIANE ANGELICA	MUÑEZ		ICA'S COLLEGE-TACLOBAN

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#### ADDITIONAL REQUIREMENTS

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OR

2. Antigen testing from DOH-accredited Laboratories 24 hours prior to the scheduled examination.

### For FULLY vaccinated examinees:

1. Original and 1 photocopy of Vaccination Card

Informed Consent (Annex A): https://bit.ly/3xirnZT

Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): https://bit.ly/3HhNMNd

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- ✓ Failure to bring any of the above-mentioned requirements will not be allowed to take the Licensure Examination.
- ✓ LGU Travel requirements are different from our mandatory requirement



### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ing :			Floor: 6TH	Room/Grp No. : 16
Seat No.	Last Name	First Name	Middle Name	School Atte	nded
1	JAYME	NEIL BERNADETTE	FANO	THE FAMILY C	LINIC, INC.
2	JUMAO-AS	WILHELM RAIFFEISEN	LIMOCO		RN UNIVERSITY
	LABURADA	KIMBERLY KATE	SEVILLA		EGE-OZAMIS CITY
ł	LACUESTA	MICHAELLA MYLES	GALLEGO	SILLIMAN UNIV	
	LADION	ALYANNA YVONNE	CARITON		EGE-PAGADIAN (for.ST.JOHN GEN
	LAGAHIT	REY LORENZO	OBSEQUIAS	SOUTHWESTE	RN UNIVERSITY
	LAGAT	CHRISTINE JADE	TAGUBA		RN UNIVERSITY
3	LAPORE	ANA BEATRIZ	MUÑOZ	SILLIMAN UNIV	

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#### ADDITIONAL REQUIREMENTS

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1. NPS/OPS RT-PCR from DOH-accredited Molecular Laboratories taken 72 hours prior to scheduled examination;

OR

2. Antigen testing from DOH-accredited Laboratories 24 hours prior to the scheduled examination.

#### For FULLY vaccinated examinees:

1. Original and 1 photocopy of Vaccination Card

Informed Consent (Annex A): https://bit.ly/3xirnZT

Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

Examination Program: https://www.prc.gov.ph/downbads-0

Post Examination Health Surveillance Form (Annex C): <u>https://bit.ly/3HhNMNd</u>

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- ✓ Failure to bring any of the above-mentioned requirements will not be allowed to take the Licensure Examination.
- ✓ LGU Travel requirements are different from our mandatory requirement



#### School : CEBU DOCTORS' UNIVERSITY

#### Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU Building :

Duna	ing .			Floor: 6TH Room/Grp No.: 17	
Seat No.	eat Last Name First Name Middle Name		Middle Name	School Attended	
1	LARA	CHRISTMAE	BURLADO	SOUTHWESTERN UNIVERSITY	
2	LLAMERA	MARY LOUISE	LIM	VELEZ COLLEGE	
3	LOOC	ROLLEN GRACE	BUSMION	UNIVERSIDAD DE ZAMBOANGA-PAGADIAN (for MENDERO COLLEGE)	
1	LUALHATI	TYRIAN MEG	CASTRO	CEBU DOCTORS UNIVERSITY	
	MACOY	JAN LEA MI	BUNAYOG	VELEZ COLLEGE	
5	MAGADAN	DYSEREE	GAMAYOT	SILLIMAN UNIVERSITY	
•	MAGALLANES	PRINCESS ALBERT	MALAZARTE	SOUTHWESTERN UNIVERSITY	
3	МАМНОТ	HYACINTH CRYSTAL	APIAG	SILLIMAN UNIVERSITY	

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OR

2. Antigen testing from DOH-accredited Laboratories 24 hours prior to the scheduled examination.

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1. Original and 1 photocopy of Vaccination Card

Informed Consent (Annex A): https://bit.ly/3xirnZT

Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): https://bit.ly/3HhNMNd

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### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ing .			Floor: 6TH	Room/Grp No. : 18
Seat	eat Last Name First Name Middle Name		School Attended		
No.					
1	MANACIO	MARY GRACE	GALLEON	SOUTHWESTE	RN UNIVERSITY
2	MANARES	GEENA JEAN	SEARES	VELEZ COLLEC	
3	MANLIGUEZ	PRINCESS KHYLE	TAPE	HOLY NAME U TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
l.	MANUBAG	CHYNNA GRACE	MACANA	VELEZ COLLEC	3F
	MANUGAS	JEFF MICHAEL	ALCOS		RN UNIVERSITY
5	MANZANO	ARL AIRA	MILANO	VELEZ COLLEC	
, ,	MAYOL	FRANCIS REGIN	HOLIVA	VELEZ COLLEC	
3	MENDEZ	SWITZEL GRACE	ROMO		RN UNIVERSITY

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OR

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Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): <u>https://bit.ly/3HhNMNd</u>

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### School : CEBU DOCTORS' UNIVERSITY

#### Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU Building :

				Floor: 6TH	Room/Grp No. : 19
Seat No.	eat Last Name First Name Middle Name o.		School Atte	nded	
1	MENDOZA	CHARESSE JOYCE	BALLESIL		
2	MERCADER	SHIERA LOU			FATIMA UNIVERSITY-VALENZUELA
3	MERCADO		GUJILDE	ADVENTIST ME MINDANAO SA	EDICAL CENTER COLLFOR NI. & HOSP. COLL. INC.)
	MERCADO	MERAVILLE	VILLARO	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
1	MONTALBAN	QUENNIE	BASTASA	,	-
5	MONTERO	JAIRA MARIE		VELEZ COLLEC	3E
		JAIRA MARIE	AREGLO	SOUTHWESTE	RN UNIVERSITY
6	MONTILLA	JISELLE MAE	CALVO	VELEZ COLLEC	2E
,	NARCISO	ADRIENNE LYRE	ORTEGA		
3	NEBRIA		ORTEGA	SILLIMAN UNIV	ERSITY
		DERYCK LEANNE SARMIENT		SOUTHWESTE	RN UNIVERSITY

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OR

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Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

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Post Examination Health Surveillance Form (Annex C): <u>https://bit.ly/3HhNMNd</u>

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#### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ing :			Floor: 6TH	Room/Grp No.: 20
Seat No.	Last Name	First Name	Middle Name	School Atte	nded
1	NIALA	MARY JOY	TALISIC	SOUTHWESTE	RN UNIVERSITY
2	OBARCO	ZARCI MARIE	OLASIMAN	SILLIMAN UNIV	ERSITY
3	OBEJERO	ALEXIA	RESANE	SOUTHWESTE	RN UNIVERSITY
4	OBLIGADO	ERVIN	ADOBAS	SOUTHWESTE	RN UNIVERSITY
5	OLIQUINO	LOTUS	GILOK	SOUTHWESTE	RN UNIVERSITY
6	OLMILLA	ANILYN	BATI-ON	OUR LADY OF	FATIMA UNIVERSITY-VALENZUELA
7	ORANIO	GLENNIS MARIE	TIROY		ORS COLLEGE (BUTUAN DR. HSP
8	ORTEZA	MARIMAR	QUIMSON	SOUTHWESTE	RN UNIVERSITY

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Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): https://bit.ly/3HhNMNd

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#### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Bulla	ing :			Floor: 6TH	Room/Grp No. : 21
Seat	Seat Last Name First Name Middle Name		School Attended		
No.					
1	PACOMO	VIANCA	HERBIAS	SOUTHWESTE	RN UNIVERSITY
2	PAGUD	MA SCARLETT	PORPOR	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
3	PALENCIA	SHANTAL MAE	INSTRELLA	SOUTHWESTE	RN UNIVERSITY
4	PALLEGA	JANIVIE GRACE	PEPITO	SOUTHWESTE	RN UNIVERSITY
5	PAQUIBOT	GWYN HARIETTE	GELIG	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
6	PARAME	KIRK CHLOE NEAL	MIRANDA	OUR LADY OF	FATIMA UNIVERSITY-VALENZUELA
7	PARDO	DANIELLE	MANDADO		FATIMA UNIVERSITY-VALENZUELA
8	PASAFORTE	SARAH MAE	OYANGORIN		RN UNIVERSITY

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OR

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Post Examination Health Surveillance Form (Annex C): <u>https://bit.ly/3HhNMNd</u>

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#### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ling :			Floor: 6TH	Room/Grp No. : 22
Seat Last Name First Name Middle Name No.			School Attended		
1	PASAMONTE	MARIA MIKAELA	BORINAGA	VELEZ COLLEC	GE
2	PELAYO	DANIELLE BRYAN	REYES	SAN LORENZO	RUIZ COLLEGE OF ORMOC
3	PEPITO	MONIERA	GUTOBAT	SOUTHWESTE	RN UNIVERSITY
4	PIADOR	JESSA	RANCES	OUR LADY OF	FATIMA UNIVERSITY-VALENZUELA
5	PIEDAD	CHARLO	AMOR	SOUTHWESTE	RN UNIVERSITY
6	PURA	ABEGAIL	VALDEVILLA	VELEZ COLLEC	GE
7	QUIRES	CHRISTINE MAE	TINAJA	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
8	RABUYA	STAN ANTHONY	BURGOS	VELEZ COLLEC	GE

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OR

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Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): https://bit.ly/3HhNMNd

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#### School : CEBU DOCTORS' UNIVERSITY

### Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ing :			Floor: 6TH	Room/Grp No.: 23
Seat No.	Last Name	First Name	Middle Name	School Atter	nded
1	RAMIREZ	MICHELLE	REUSORA	SOUTHWESTE	RN UNIVERSITY
2	REAL	FRANCE EDEN YVYTTE	INTONG	VELEZ COLLEG	θE
3	REVILLE	NATHANIE	ABELLO	SOUTHWESTE	RN UNIVERSITY
4	REYES	JONNAVEL	ESTEBAN	GENERAL SAN FOUNDATION	TOS DOCTORS' MEDICAL SCHOOL
5	RIPDOS	CELYN JOY	MARAVILES	SOUTHWESTE	RN UNIVERSITY
6	ROMERO	EBB HERSHEY	DEMILLO	OUR LADY OF	FATIMA UNIVERSITY-QC
7	ROSALEJOS	ROBELINE	HAO	HOLY NAME UN TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
8	SABANG	MA. BELLA	LOBITAÑA	SOUTHWESTE	RN UNIVERSITY

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Post Examination Health Surveillance Form (Annex C): https://bit.ly/3HhNMNd

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#### School : CEBU DOCTORS' UNIVERSITY

### Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ling :			Floor: 6TH	Room/Grp No. : 24
Seat No.	Last Name	ast Name First Name Middle Name School Attended		nded	
I	SACANAY	SHAYNE NIKKY	CABALQUINTO	SOUTHWESTE	RN UNIVERSITY
2	SALADA	RAPHAELA HYACINTH	TOLENTINO	VELEZ COLLE	GE
3	SALAS	MERCY QUITERIA	ARATAN	HOLY NAME U TAGBILARAN)	NIVERSITY (for.DIVINE WORD-
1	SALEM	PRINCESS ALMA	YNCIERTO	SOUTHWESTE	RN UNIVERSITY
5	SALOMON	ESTREL MARIE	DELA CRUZ	VELEZ COLLE	GE
5	SATUITA	GAY CARMEL	BACLAY	SOUTHWESTE	RN UNIVERSITY
7	SENO	KATE THERESE	YTOK	CEBU DOCTO	RS UNIVERSITY
3	SENO	VINCENT VIC	CUYOS	SOUTHWESTE	RN UNIVERSITY

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OR

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Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): <u>https://bit.ly/3HhNMNd</u>

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#### School : CEBU DOCTORS' UNIVERSITY

### Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Building :		Floor: 6TH	Room/Grp No. : 25			
Seat No.	Last Name	First Name	Middle Name	School Atter	School Attended	
1	SEPE	JESSAMARIE	TORIBIO	SOUTHWESTE	RN UNIVERSITY	
2	SILVA	GWYNETH MARIE	LIM	OUR LADY OF	FATIMA UNIVERSITY-VALENZUELA	
3	SIM	ABIGAIL CHRISTINE	DAYATA	VELEZ COLLEC	GE	
4	SOLERA	JEA ELAIZA	BARRIENTOS	MINDANAO ME	DICAL FOUNDATION COLLEGE	
5	SUPIEZA	JOHN DELBERT	COSADIO	SOUTHWESTE	RN UNIVERSITY	
6	TABAÑAG	JEFFERSON	FLORES	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-	
7	TABIGUE	CELESTE JOY	PAÑA	CEBU DOCTOR	RS UNIVERSITY	
8	TAGUPA	APPLE	GAMIT	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-	

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#### ADDITIONAL REQUIREMENTS

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Informed Consent (Annex A): https://bit.ly/3xirnZT

Health Declaration Form (Annex B): <u>https://bit.ly/3rMluTz</u>

Examination Program: https://www.prc.gov.ph/downloads-0

Post Examination Health Surveillance Form (Annex C): https://bit.ly/3HhNMNd

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- ✓ LGU Travel requirements are different from our mandatory requirement



#### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Building :			Floor: 6TH	Room/Grp No.: 26		
Seat No.	Last Name	First Name	Middle Name	School Atte		
1	TALABOC	ROBELYN MAY	CUADRA	SOUTHWESTE	RN UNIVERSITY	
2	TAMBIS	KATHLYN FAITH	MERCADO		SOUTHWESTERN UNIVERSITY VELEZ COLLEGE	
3	TAN	ELIZA DOMINIQUE	DE LOS REYES			
4	TAN	ELIZABETH	RAMIREZ		VELEZ COLLEGE	
5	TANUCAN	JOANNA MAE	LUMOGDANG		SOUTHWESTERN UNIVERSITY	
6	TAPING	CARMILA MAY	NAVARRO			
7	TEVES	ELMER ALEXANDER	KUIZON	VELEZ COLLEG	FATIMA UNIVERSITY-VALENZUELA GE	

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# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build				Floor: 6TH	Room/Grp No. : 27	
Seat No.	Last Name	First Name	Middle Name	School Atte	nded	
	TINDOY	ANGELA CHRISTY	VALEROSO	VELEZ COLLEG	GE	
	UFANA	PATRICIA SHANE	BAGUIO	VELEZ COLLEC		
	VALLE	FRITZIE MAE	OUANO	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-	
	VALLESER	JESSA MAE	DORUPAN	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-	
	VALLINAS	MARY ROSE	ROSAL	HOLY NAME UI TAGBILARAN)	NIVERSITY (for.DIVINE WORD-	
	VALMORIA	ANGELI	MARANGA	HOLY NAME UN TAGBILARAN)	NIVERSITY (for.DIVINE WORD-	
	VASQUEZ	CELESTE MARTHA	TAYO	VELEZ COLLEG	GE	

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#### School : CEBU DOCTORS' UNIVERSITY

# Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Build	ling :			Floor: 6TH	Room/Grp No.: 28	
Seat No.	Last Name	First Name	Middle Name	School Atte	tended	
	VELASCO	LUIGI RANDUL	VILLANUEVA	DIPOLOG MED FOUNDATION,	ICAL CENTER COLLEGE	
	VIDAL	NIÑA MAE	LATOJA	HOLY NAME U TAGBILARAN)	NIVERSITY (for.DIVINE WORD-	
	VILLALUZ	JERAMAE	BELMONTE	SILLIMAN UNIVERSITY		
	VILLARIAS	GRACIOUS MARIE	REQUINA	SILLIMAN UNIVERSITY		
	VILLARUEL	MILKY MARIE	ALOTA	SOUTHWESTERN UNIVERSITY		
	YAMBOT	JASON PATRICK	DARYANANI	VELEZ COLLEC	GE	
	YAP	ALEXIS NICOLE	MOSQUITO	SILLIMAN UNIV	ERSITY	

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#### School : CEBU DOCTORS' UNIVERSITY

#### Address : NORTH RECLAMATION AREA, MANDAUE CITY, CEBU

Building :			Floor: 6TH	Room/Grp No. : 29	
Last Name First Name Middle N		Middle Name	School Atte	ended	
YAP	MUELANIE DEBBIE	INDOSO	CEBU DOCTO	CEBU DOCTORS UNIVERSITY	
YBAÑEZ	KIMBERLY LEYR	LUMONGSUD	VELEZ COLLEGE		
YEE	KELLY KENTH	MORANDARTE		DIPOLOG MEDICAL CENTER COLLEGE FOUNDATION, INC	
YU	NICOLE KIMBERLY	TIO	CEBU DOCTO	RS UNIVERSITY	
ZABALA	KEREN MICAH	DUNGOG	SOUTHWESTE	ERN UNIVERSITY	
ZAMORA	LORELIE FAYE	DIN	SILLIMAN UNI	VERSITY	
	YAP YBAÑEZ YEE YU ZABALA	Last NameFirst NameYAPMUELANIE DEBBIEYBAÑEZKIMBERLY LEYRYEEKELLY KENTHYUNICOLE KIMBERLYZABALAKEREN MICAH	Last NameFirst NameMiddle NameYAPMUELANIE DEBBIEINDOSOYBAÑEZKIMBERLY LEYRLUMONGSUDYEEKELLY KENTHMORANDARTEYUNICOLE KIMBERLYTIOZABALAKEREN MICAHDUNGOG	Last NameFirst NameMiddle NameSchool AtterYAPMUELANIE DEBBIEINDOSOCEBU DOCTOYBAÑEZKIMBERLY LEYRLUMONGSUDVELEZ COLLEYEEKELLY KENTHMORANDARTEDIPOLOG MELYUNICOLE KIMBERLYTIOCEBU DOCTOZABALAKEREN MICAHDUNGOGSOUTHWESTE	Last NameFirst NameMiddle NameSchool AttendedYAPMUELANIE DEBBIEINDOSOCEBU DOCTORS UNIVERSITYYBAÑEZKIMBERLY LEYRLUMONGSUDVELEZ COLLEGEYEEKELLY KENTHMORANDARTEDIPOLOG MEDICAL CENTER COLLEGEYUNICOLE KIMBERLYTIOCEBU DOCTORS UNIVERSITYZABALAKEREN MICAHDUNGOGSOUTHWESTERN UNIVERSITY

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