



**Professional Regulation Commission  
ILOILO CITY**

**Licensure Examination for N U R S E**

**June 5 & 6 , 2016**

**School : ILOILO DOCTORS' COLLEGE**

**Address: WEST TIMAWA MOLO, ILOILO CITY**

**Building : AVR3**

**Floor : 2ND FLR.**

**Rm/Grp No.: 7**

Seat No.	Last Name	First Name	Middle Name	School Attended
1	VILLARIN	MARICEL	LAMATA	COL SAN AGUSTIN-BACOLOD CITY
2	VILLARUZ	DANIELLE LOUISE	LIM	W.V.S.U.-LA PAZ
3	VILLARUZ	LOVELYN GRACE	NILAS	RIVERSIDE COLL.
4	VILLARUZ	SHAYNE MARIE	CABUGAO	ST.ANTHONY COLL-ROXA
5	VILLASIS	JERAH MARIE	VEÑAS	FILAMER CHRISTIAN
6	VILLASIS	KARELL RAVE	LARIOS	W.V.S.U.-LA PAZ
7	VILLASOTO	LADY ANNE	REYES	DR. G.LACSON COLLEGE
8	VILORIA	AZENITH	UY	RIVERSIDE COLL.
9	VINCO	MA EMELIE	JUNAS	RIVERSIDE COLL.
10	YANGA	VIRGILIE MAY	MORTALLA	ST.GABRIEL COLL.-KALIBO
11	YANSON	APRYL MAREY JOY	VILLA	COL SAN AGUSTIN-BACOLOD CITY
12	YCAY	GRECHELLE	FANCO	ST.GABRIEL COLL.-KALIBO
13	YEE	KARL KENNETH	PEREZ	W.V.S.U.-LA PAZ
14	YU	JASHY JOY	ALISLA	ST.ANTHONY COLL-ROXA
15	ZAUSA	REYNON GYD	ORBISTA	W.V.S.U.-LA PAZ
16	ZAYCO	SUZAINÉ	TURBANOS	WEST NEGROS COLL.
17	ZERRUDO	AIZA	DEOCARIZA	UNIV.OF ILOILO
18	CASTRO	SHERYLL GRACE	VALLE	UNIV.OF ILOILO
19	SANZ	SHEILA MAE	ABANALES	RIVERSIDE COLL.
20	YOUNG	JOSHER JAY	MAYPA	CNTRL PHIL.ADVENTIST

**REMINDERS:.**

USE SAME NAME IN ALL EXAMINATION FORMS. IF THERE IS AN ERROR IN SPELLING IN NAME AND/OR SCHOOL NAME, PLEASE REPORT TO THE EXAMINATION DIVISION BEFORE THE EXAMINATION OR KINDLY REQUEST YOUR ROOM WATCHERS TO CORRECT IT ON THE FIRST DAY OF EXAMINATION.