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Republic of the Philippines
Professional Regulation Commission
Manila

PRC App Form No. 001-A
(Sept 2007)

Paste here your recent
passport size picture
with COMPLETE Name Tag
in plain white background

Scanned/Photocopied
picture not accepted

Application No. _____

APPLICATION & QUALIFICATION EVALUATION DIVISION

NURSES' APPLICATION FORM (NAF)

- 1ST TIMER (NEW)
 REPEATER
 CONDITIONED

- Regular B.S. Nursing With Other Degree/s

Date of Examination _____ Place of Examination _____

WARNING: All documents/statements submitted are subject to verification and any false statement or misrepresentation made in this application is a ground for disqualification and criminal prosecution/administrative sanction for falsification

PERRC No. _____

Part I - PERSONAL INFORMATION

SURNAME		GIVEN NAME		MIDDLE NAME	M.I.
<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	COMPLETE MAILING ADDRESS (House No., Street, Town Prov./City)			ZIP CODE	Town/City/Prov RURBAN CODE
CITIZENSHIP	E-mail Address	Landline and Mobile No. (include area code)			
<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED	<input type="checkbox"/> WIDOW/ER <input type="checkbox"/> ANNULLED <input type="checkbox"/> LEGALLY SEPARATED	DATE OF BIRTH (mm/dd/yyyy)	PLACE OF BIRTH (City, Town Province)		Town/City/Prov RURBAN CODE
SPOUSE'S NAME & CITIZENSHIP		FATHER'S NAME & CITIZENSHIP		MOTHER'S NAME & CITIZENSHIP	
HAVE YOU EVER BEEN CONVICTED IN A FINAL JUDGMENT BY ANY COURT, MILITARY TRIBUNAL OR ADMINISTRATIVE BODY? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, attach hereto a copy of the decision)					

Part II - EDUCATIONAL INFORMATION

NAME of SCHOOL	ADDRESS/LOCATION of SCHOOL		PRC SCHOOL CODE	
DEGREE/COURSE OBTAINED B. S. Nursing	PRC COURSE CODE 4018	DATE GRADUATED (mm/dd/yy)	PRC BOARD CODE 2600	
OTHER EDUCATIONAL ATTAINMENT <i>Degree/Course prior to BS Nursing</i>	NAME of SCHOOL	PRC SCHOOL CODE	ADDRESS/LOCATION of SCHOOL	DATE GRADUATED (mm/dd/yyyy)
1st				
2nd				
3rd				
REVIEW SCHOOL/CENTER ATTENDED				

Part III - PREVIOUS NURSES' LICENSURE EXAMINATION/S TAKEN

NAME of EXAMINATION	PLACE of EXAM	DATE TAKEN	RATING	RESULT OF EXAMINATION (Pls. check)			EXAM NO	VERIFIED BY
				PASSED	FAILED	COND.		

STATUS CODES (refer at the back) :

1.) EXAMINATION TYPE (EX CODE)

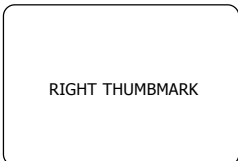
2.) NUMBER of TIMES TAKEN (NX CODE)

I HEREBY CERTIFY that the information and/or statements in this application including the exhibits submitted in support thereof are all true and correct of my own knowledge, and that I am fully aware that any false information or statement in this application or in its attachments shall render me liable for criminal prosecution and /or administrative sanction.

I AM WILLING TO TAKE A VALIDATING EXAMINATION IN CASE THE TEST RESULTS IN MY PLACE OF EXAMINATION ARE STATISTICALLY IMPROBABLE.

Signature _____

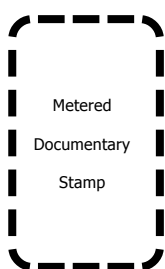
Date _____



<p>ACTION TAKEN BY THE APPLICATION PROCESSOR</p> <p>Processed by: _____</p> <p>Date: _____</p> <p>Remarks: _____</p>	<p>ACTION TAKEN BY THE LEGAL DIVISION/OFFICER</p> <p>Processed by: _____</p> <p>Date: _____</p> <p>Remarks: _____</p>
<p>ACTION TAKEN BY THE CASH SECTION</p> <p>Amount: _____</p> <p>O.R. No: _____</p> <p>Date: _____</p> <p>Issued by: _____</p>	<p>ACTION TAKEN BY THE BOARD</p> <p>Chairman: _____</p> <p>Member: _____</p> <p>Member: _____</p> <p>Remarks: _____</p>
<p>ACTION TAKEN BY THE ISSUING OFFICER</p> <p>Issued by: _____</p> <p>Date: _____</p> <p>Remarks: _____</p>	

Subscribed and sworn to before me this _____ day of _____ 20____ at _____. Affiant applicant exhibited to me his/her Community Tax Certificate No. _____ issued at _____ on _____.

PRC Administering Officer _____



print this form using LASER or INKJET printer having BEST or NORMAL print setting & FIT TO PAPER in 8.5 x 14 (legal size) paper

PRC Form webcopy

CHECKLIST OF REQUIREMENTS (ORIGINAL and PHOTOCOPY)

- NSO Birth Certificate
- NSO Marriage Contract (female married applicant)
- Transcript of Records with degree/course, exact date of graduation, Special Order (S.O)/exemption/accreditation/deregulation status, **SCANNED PICTURE** and remarks "FOR BOARD EXAMINATION PURPOSES ONLY"
- Summary of Related Learning Experience (with total number of hours)
- Record of O.R-D.R Cases
- CHED Recognition or permit to operate for graduates of new schools/programs

OTHER REQUIREMENTS

- a.) Examination Fee Php : 900.00 (complete)/ 450.00 (conditioned)
- b.) 4 pcs passport pictures in white background with complete name tag
- c.) 1 piece window mailing envelope with metered postage stamp
- d.) Current Community Tax Certificate (cedula)

STEPS in APPLYING for LICENSURE EXAMINATION

STEP 1: Secure Nurses' Application Form (NAF) at the Information Desk or download from www.prc.gov.ph

STEP 2: Fill-up Application Form and proceed to Processing Counters (windows 5,6,7,8) or other designated counters.

For : **OTHER DEGREE HOLDER/2ND COURSER** - proceed to the Rating Division for interview by the Board of Nursing; Regional Filing Center - submit and return at appointed schedule

REPEATER/CONDITIONED - proceed to Records Section/Unit for rating/result verification

REPEATER WITH CHANGE OF CIVIL STATUS - proceed to the Asst. Secretariat's office for change status approval

FOREIGN SOUNDING SURNAME/BORN ABROAD/FOREIGN PARENT/S : proceed to Legal Division/Unit for approval of citizenship

STEP 3: Pay examination fee at the Cashier's Counters (windows 1,2,3,4) or other designated counters.

STEP 4: Accomplish all PRC Forms. Copy **Application Number** on the Notice of Admission.

STEP 5: Proceed to the Customer Service Center/ PRC Coop Store for the metered stamps and window mailing envelope.

STEP 6: Proceed to the Issuance Counters (windows 9,10,11,12) or other designated counters.

STEP 7: Return to PRC 2-3 days before the exam date for verification of school/building/room assignment.

RURBAN CODES/SCHOOL CODES/COURSE CODES/BOARD CODES/STATUS CODES

1. Refer to the MASTERLIST of ADDRESS/RURBAN CODES posted at the premises of the filing center for the CODES of the Town, City or Province of your Residence and Postal Address and Place of Birth. This is different from the ZIP CODE.

2. Refer to the MASTERLIST of SCHOOL CODES also posted at the filing center for the School /College/University and Location

3. Refer to the MASTERLIST of COURSE CODES for the Course Code.

4. For STATUS CODES, use the following:

- a. **EX CODE** - Examination Type Code
 - Print "1" for Complete/First Timer
 - Print "2" for Repeaters
 - Print "3" for Removal/Conditioned

- b. **NX CODE** - Number of Times Taken
 - Print "0" for None
 - Print "1" for Once
 - Print "2" for Twice... and so on

I M P O R T A N T

1. Keep and bring your Notice of Admission with Official Receipt, window mailing envelope securely stapled. Application Number will be used when you fill up the Identification Sheet on the day of examination.

2. Bring pencils (No. 2), ballpen (with **black ink only**), one piece (1) big brown envelope, one long transparent plastic envelope.

3. Report to your school assignment before 6:00 a. m. on examination days. Late examinees will not be admitted. This will mean forfeiture of examination fee.

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