CERTIFICATE OF CONSENT

CRISTINE JOY D. VILLANUEVA				, a Filipino citizen,
	e Name, Last Name, Exten		TACLOR	•
of legal age, and a resident of _	BRGYT	10 UTAP ZONE 5		AN CITY,
hereby, declare that:		(Complete Add	11622)	
e.e.e.y, acciai e iliaii				
I understand that the Career Service Exam-Pe	encil and Paper Tes		(CSC) on	
(Title of	Examination)			(Date of Examination)
2. I am participating in said	examination as:	Examine	ee 🗆	Examiner
I am fully aware of the co and its potential health th	•	ce of the Coro	na Virus	Disease (COVID-19)
 I understand that all kno with the Omnibus Guid Management of Emergated taken/instituted by the CS 	delines of the ging Infectious	Inter-Agency Diseases, t	Task Fo	orce (IATF) for the ire my safety are
 I understand that it is measures such as, but accomplished Health December sanitizing as often as portesting and Quarantine F 	it not limited claration Form, v ssible, physical	to, submission wearing of face distancing, and	n of a e mask a d observ	duly and truthfully and face shield, hand ance of the RT-PCR
 I understand that, despite exposure to COVID-19 protection from potential not and cannot be guarar 	is an ever-pres	sent risk for w	hich m	y absolute safety oi
With my full knowledge and und my consent and confirm my partheCareer Service Exam-Pencil a	rticipation on my	own free will	and voli	, , ,
Accordingly, I set CSC entirely contract COVID-19 during the po	free from any	•		ty in the event that
adullamour				
GAN NAMANA CRISTINE JOY D. VILLANU	EVA		J.	UNE 5, 2023
Signature over printed full name of examinee/examiner		_	Date	
0				
LOWELL B, TEBRERO				JUNE 5, 2023
Signature over printed full name of witness			Date	