


**Parents' / Guardian's Certification of Waiver / Permission**

This is to certify that I am allowing my son/daughter, Mr./Ms. Edlyn U. Prado to undergo **24-hours FACE-TO-FACE FIELD STUDY 6 OBSERVATION** for a minimum of **THREE (3) days** starting on **FEBRUARY 28** until **MARCH 01, 2023** at East Central Integrated School in partial fulfillment of the requirements for the Field Study course of Bachelor of Elementary Education.

It is understood that he/she abides by the rules and regulations that may be imposed by the Cooperating Teacher/School Head/Professor for his welfare and safety. I fully agree to waive any responsibility on the part of PHINMA University of Pangasinan and or the representative/s in case of any untoward incident that may happen, harm or injury that may transpire on his/her person during the duration of the Field Study Observation.

  
MARIA LOURDES U. PRADO  
Signature of Parent/Guardian Over Printed Name  
Date Signed: February 24, 2023