

Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

UNIVERSAL HEALTH CARE

Citystate Centre, 709 Shaw Boulevard, Pasig City Call Center: (02) 441-7442 | Trunkline: (02) 441-7444 www.philhealth.gov.ph

DECLARATION THAT MY APPLICATION FOR EMPLOYMENT HAS NO CONFLICT OF INTEREST WITH THE NATURE OF BUSINESS OF PHILHEALTH

I, Mr./Ms, of legal age.
resently residing at
o hereby declare that I am not in anyhow related or affiliated with any of the Philippine Health
nsurance Corporation's Accredited Health Care Providers.
That my application for employment has no conflict of interest with the nature of business
f the Corporation.
Signed at Pasig City on
Signature over Printed Name of Applicant

