

# Republic of the Philippines Professional Regulation Commission Manila

## **REGISTRATION DIVISION**

### **ACTION SHEET FOR CERTIFICATION**

Date filed:	
PURPOSE (please check)  ICHP	
ICHP State Board Local Employment Others:	
Amount:	
Amount:	сору)
Amount:	
Date: Issued by: Date due:	
PLEASE FILL OUT THIS CLAIM SLIP  No. of copies:  PROFESSION:  LICENSE NO.:  DATE REGISTERED:	
PLEASE FILL OUT THIS CLAIM SLIP  NO. of copies:  PROFESSION:  LICENSE NO.:  DATE REGISTERED:	
LICENSE NO.: DATE REGISTERED:	
Date filed: Jan Feb Mar Apr May Jun Jul Aug Sept Oct Nov Dec  Date filed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	
1 2 3 4 3 0 7 0 7 10 11 12 13 14 13 10 17 10 17 20 21 22 23 24 23 20 27 20 27 30 31	
Date due: Jan Feb Mar Apr May Jun Jul Aug Sept Oct Nov Dec 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	
Please present this slip to claim documents at Window REPRESENTATIVE WITH PROPER IDENTIFICATION SH PRESENT AUTHORIZATION LETTER FROM THE REGISTERED PROFESSIONAL.	OULD
REGISTRATION OFFICER	

### **PROCEDURES**

- **Step 1**. Accomplish this Action Sheet (AS).
- Step 2. Pay prescribed fees at the Cashier
- **Step 3**. Present duly accomplished AS together with the requirements and receive your claim slip at Window 16 Window 18 Window 30
- Step 4. Claim your documents as scheduled. Please refer to your claim slip for further instructions.

#### **REQUIREMENTS**

- 1. Duly accomplished Action Sheet
- 2. Photo/xerox copy of valid professional license and claim stub in case ID was renewed and under process
- 3. Official receipt