

 PHILIPPINE ACADEMY OF MICROBIOLOGY, INC. (PAM) 10037 Ruby St. Los Baños Subdivision, Brgy. Batong Malake, Los Baños Laguna 4030 Email: connect@pam.org.ph ; CP: 09175160793		FORM <i>PAM-FM-07-01-002B</i>	
Section	Records and Information Requirement	Page	1
Subsection	Records of applicants, candidates, and certified persons	Effectivity Date	January 1, 2017
Subject	Application Form for Registered Microbiologist Without Certification Examination for an MS Degree Holder Under Meritorious Cases (Industry)	Revision no.	1

2" x 2" Photo
of
Applicant

4. GENERAL INFORMATION

Name of Applicant		
Permanent Address		
Mailing Address		
Date and Place of Birth		
Name and Address of Employer		
Present Occupation / Position in Employment		
Landline Number	Mobile Number	Email Address
Nationality	Civil Status	Gender

1. ACADEMIC QUALIFICATIONS

Degree	Specialization	University and Address	Year Graduated

2. MICROBIOLOGY COURSES TAKEN IN ALL DEGREES ATTAINED

Microbiology Courses	Number of Units
General or Basic Microbiology	
Microbial Physiology	
Diagnostic or Clinical Microbiology	
Microbial Ecology / Environmental Microbiology	
Microbial Genetics	
Microbial Taxonomy / Microbial Identification	
Soil Microbiology	
Food Microbiology	
Industrial Microbiology	
Medical Microbiology	
Molecular Microbiology	
Mycology	
Virology	
Phycology	
Plant Pathology	
Public Health Microbiology	

Practicum in Microbiology	
*Research/Thesis in Microbiology	
Others (please specify)	

*Must attach: 1) Photocopy of the acceptance page or certified true copy of the certification of adviser that the research is in microbiology, and
2) Title and abstract of the research

3. PROFESSIONAL EXPERIENCE

At least fifteen (15) years of professional work experience as a microbiologist and must have occupied a supervisory position in the industry. (Attach supporting documents)

Institution/Employer Name	
Address	
Contact Number of Institution/Employer	
Email Address	
Position	
Nature of MCB-related Work	
Inclusive Period (Month and Year)	
Institution/Employer Name	
Address	
Contact Number of Institution/Employer	
Email Address	
Position	
Nature of MCB-related Work	
Inclusive Period (Month and Year)	
Institution/Employer Name	
Address	
Contact Number of Institution/Employer	
Email Address	
Position	
Nature of MCB-related Work	
Inclusive Period (Month and Year)	

4. ACCOMPLISHMENTS AS A MICROBIOLOGIST IN THE INDUSTRY

The applicant must have accomplished at least two (2) of any of the following listed in 4A to 4C. (Attach supporting certification by the company on such two items, detailing the accomplishments)

A. Introduced a new, applicable microbiology-related process to the company, which has been adopted by the company

Name of Company/Institution	
Address of Company/Institution	
Contact Number of Company/Institution	
Email Address of Company/Institution	
Position of the Applicant	
Inclusive Period of Employment (Month and Year)	
Specific, new, applicable Microbiology-related Process Adopted by the Company/Institution	

B. Solved through research, a microbiology-related problem of the company

Name of Company/Institution	
Address of Company/Institution	
Contact Number of Company/Institution	
Email Address of Company/Institution	
Position of Applicant	
Inclusive Period of Employment (Month and Year)	
Specific Microbiology-related Problem Solved for the Company/Institution	

C. Developed a microbiology-related product that is currently commercialized or sold in the market

Name of Company/Institution	
Address of Company/Institution	
Contact Number of Company/Institution	
Email Address of Company/Institution	
Position of Applicant	
Inclusive Period of Employment (Month and Year)	

Specific Microbiology-related Product Currently Commercialized or Sold in the Market	
--	--

I certify that the information I provided on and in connection with this form is true and correct.
I agree to comply with the certification requirements and to supply any information needed for assessment.

APPLICANT	ENDORSEMENT by PAM Member (Diplomate or Fellow)
Signature over printed name	Signature over printed name
Date:	Date:

NOTE:

Send one set of hard copies of the following, together with the accomplished application form:

1. Diplomas or certifications of graduation
2. Transcripts of records or certified true copy of grades
3. Certifications from the company on the accomplishments as a microbiologist.
4. Copy of the first page of the ISI/WoS/Scopus-indexed publications

SEND ABOVE DOCUMENTS TO:

The PAM Chair
10037 Ruby St. Los Baños Subdivision, Brgy. Batong Malake, Los Baños, Laguna 4030
Contact Information: 09175160793

SOFT COPIES of all submitted forms and documents **SHOULD ALSO** be emailed to:

The CBd Secretary. Email address: connect@pam.org.ph.

Upon approval of application, a certification fee of Php 3,000.00 will be required. Pay to: PAM PNB account number: 246470000865 and send a copy of the payment receipt to connect@pam.org.ph.

