

2" x 2" Photo of Nominee

Date Submitted:

() Mr	Name			
() Ms				
() Dr	Last Name F	First Na	ame	Middle Name
Date and	Place of Birth		Affiliation	
Civil Stat	tus		Position	
Home Ac	ldress		Business Address	
Home Ph	none Number/Mobile Phone Numb	ber	Current Address	
Email Ad	Idress		Mailing Address	

De	Degree		ization	University and Address		Year Graduated
2. CERTIFICA	ATION AS MICE	ROBIOLOG		AM (Attach certific		of Certification
		· (5.5)				
Registered	l Microbiologist	t (RMicro)				
Specialist	Microbiologist	(SMicro)				
A. Life Men Date of A B. Attendar the three	nbership (<u>Includ</u> Acceptance: nce in at least th e required PSM	le photocop nree (3) PSN annual con	y of the ce A Annual (vention at	Conventions in the tendance can be r	last five (5)	attendance in
A. Life Men Date of A B. Attendar the three	nbership (<u>Includ</u> Acceptance: nce in at least th e required PSM ter symposia or	nree (3) PSN annual con two regiona	y of the ce M Annual (vention at al symposi	rtificate) Conventions in the	last five (5) eplaced by a (<u>Attach sup</u>	attendance in
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supporting documents)

- C. Must have accomplished or undertaken at least ten (10) of any combination of the following: (Include certification from the company)
 - Improved/modified a microbiology-related procedure (i.e., assay) used in the company. The company should be implementing the improved/ modified procedure;
 - 2) Solved through research a microbiology-related problem of the company.
 - 3) Introduced a new, applicable microbiology-related process to the company.
 - 4) Developed, tested, and registered a microbiology-related product that is currently commercialized or sold in the market.
- D. At least two (2) national/international professional awards (first place, if ranked) in the field of microbiology. University awards are not considered national awards. One of the two national/international awards can be replaced by five (5) publications in ISI/WoS/Scopus-indexed journals. (Include photocopy of first page of all publications and proof of indexing.)

1.

2.

OR

Two (2) rank promotions given by the company due to accomplishments in the field of microbiology (duly certified by the supervisor)

1.

2.

MS/Doctorate holders certified as Registered Microbiologists without taking the certification examination must have a one-year residency as RMicro. The articles used in substitution for the microbiology units can no longer be used for substitution for national/international award.

I vouch for the good moral character of the above nominee.

Printed Name and Signature of PAM Nominator (Diplomate or Fellow)
Date

Send one set of hard copies of the 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.

Submit only information/documents relevant to the evaluation.

FOR PAM CERTIFICATION BOARD (CBd) USE ONLY

EVALUATED BY	PRINTED NAME AND SIGNATURE	
CBd CHAIR		
CBd SEC		
CBd MEMBER		
CBd MEMBER		
CBd MEMBER		
ACTION TAKEN:	[] APPROVED	[] DISAPPROVED
Remarks		
Date	<u> </u>	

	Amount	OR Number	Date	Remarks
Certification Fee				

PAM CBd September 3, 2025