

GOOD MORAL CHARACTER AND PROFESSIONAL ETHICS ENDORSEMENT

(Date)

The Secretary
Philippine Board of Anesthesiology
Room 109 PMA Building, North Avenue
1105 Diliman, Quezon City

Dear Sir/Madam:

This is to certify that _____, M.D.
of _____ has been known to us
for many years and that we, the undersigned, could vouch for his/her
professional behaviour and that no case of immorality is known to have been filed
against the candidate. His/Her practice has always been in conformity with
professional ethics.

Respectfully yours,

(Signature over printed name/Position)

(Signature over printed name/Position)