PBA FORM 1.05

PHILIPPINE BOARD OF ANESTHESIOLOGY FOUNDATION, INC. PMA Building, North Avenue, Quezon City 1105 Telefax: (02) 927-74-07 E-mail: philboardofanesth@yahoo.com

Application Form must be accompanied by the following: (Check below the documents enclosed in your application.)

- ____ ID pictures, 2" x 2", two copies
- _____ Photocopy of current PRC ID card
- _____ A letter of recommendation or Certificate of ethical professional behaviour from the
 - 1. Medical Director or Chief of Hospital or
 - 2. Chairman or Training Officer or any bonafide DPBA

who can attest that no case of immorality is known to have been filed against the candidate.

_____ Certificate of three years (3) years PBA accredited residency training program

A check/cash for \neq 4,000.00 for application and written examination fees

(Please make all checks payable to the **Philippine Board of Anesthesiology**. **No Postal Money Order please**.)

_____ Certificate of PSA membership in good standing for 2020 (both local and national)

- _____ Certificate of PMA membership in good standing for 2019
- _____ Resident trainee's Service and Technique Summary Report (Aendicus)

* To qualify for the written specialty board examination, the candidate must have **completed and logged** ALL THE REQUIREMENTS (minimum of 1,000) of the PBA for both cases and techniques.

CME Activities for the last 3 years (Aendicus)

We look forward to the prompt completion of your application.

Very truly yours,

THE CREDENTIALS COMMITTEE