



**CERTIFICATE OF CANDIDACY (COC)**

Election Year 2020

**A. PERSONAL DATA**  Clinical Laboratory Practice  
 Academe  
 Other areas of practice: \_\_\_\_\_

<b>Surname</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Date of Birth (Mo-Day-Yr)</b>
<b>Sex</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Civil Status</b> <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widow(er) <b>No. of children</b>	<b>Citizenship</b> <b>How acquired</b> <input type="checkbox"/> By Birth <input type="checkbox"/> Naturalization	<b>Place of Birth</b> <b>With immigrant visa</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Country
<b>Home Address</b>		<b>TIN</b> <input type="checkbox"/> SSS <input type="checkbox"/> GSIS No.	<b>Religion (Please specify)</b>
<b>Tel. No.</b>		<b>PRC Registration No.</b>	<b>PAMET ID No.</b>
<b>Permanent Address</b>			
<b>Tel. No.</b>		<b>PRC ID Valid until (Month &amp; Year)</b>	<b>Category of Membership</b> <input type="checkbox"/> Fellow <input type="checkbox"/> Diplomate <input type="checkbox"/> Regular B
<b>Email address</b>	<b>Cellphone No.</b>		
<b>School (Where BSMT/BSMLTs Degree was earned)</b>	<b>Graduation (Year)</b> <b>Honor or Distinction Received</b>	<b>MT Licensure Examination Passed (Year taken)</b>	<b>Member since (Year)</b> <b>ID Valid until (Month &amp; Year)</b>
<b>Present Employment (Name of Institution)</b>		<b>Business Address</b>	<b>Tel. No.</b> <b>Email Address</b>

**WORK EXPERIENCE (Please include ALL - from the most current to earlier work experiences)**

Inclusive Period (Year)	Name of Institution / Company (Include nature of business of the institution and ownership)	Position	Brief description of nature of professional work done or undertaken



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*Additional sheet(s) maybe used, if necessary.*

**A.1 AWARDS / CITATIONS / SCHOLARSHIPS RECEIVED**

<b>Name</b>	<b>Brief Description</b>	<b>Awarded By</b>	<b>Date (Year)</b>

*Additional sheet(s) maybe used, if necessary.*

**A.2 PARTICIPATION IN PAMET AND OTHER PROFESSIONAL/CIVIC ORGANIZATIONS**  
(Past and present)

<b>Name of Organization</b>	<b>Brief Description of Participation</b>	<b>Inclusive Period</b>

*Additional sheet(s) maybe used, if necessary.*

**B. DECLARATION OF COMMITMENT**

**B.1. Code of Election Ethics**

As I submit my Certificate of Candidacy, I am cognizant of the fact that a positive electoral process redounds to the greater good of the Philippine Association of Medical Technologists (PAMET) as it is the centerpiece of a civil society. As I engage myself in the electoral process, I promise to commit



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myself to the five core values fundamental to having a positive electoral process – honesty and fairness, respect, compassion, and responsibility.

I shall not use or agree to let third parties to use subtle deceptions, half-truths, or falsifications either to build my image or discredit my opponent.

I shall avoid demeaning references to my opponent. I shall respect my opponent. I shall not use or allow to be used personal attacks or innuendo.

I shall show compassion at all times for my opponent

Lastly, I take full responsibility for how I conduct and behave myself to include those who support me. I will not participate nor condone actions contrary to the principles espoused in this code of election ethics.

***I will respect the results of the election as declared by COMELEC and will abide by their decision whenever a complaint is filed.***

**CONFORME:**

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PRINTED NAME AND SIGNATURE

### B.2. Self – evaluation Questionnaire

- B.2.1. Are you a citizen and a resident of the Republic of the Philippines?  Yes  No  
D.2.1.1. Are you a holder of dual citizenship?  Yes  No  
D.2.1.2 Is your workplace in the Philippines?  Yes  No
- B.2.2. Are you a registered Medical Technologist/ Medical Laboratory Scientist of the Professional Regulation Commission of the Republic of the Philippines?  Yes  No  
B.2.2.1 Do you currently hold a valid PRC ID of a Medical Technologist?  Yes  No
- B.2.3. Are you a qualified voter of the Association as certified by the Committee on Membership?  Yes  No
- B.2.4. Are you a member of good standing belonging to Category B Regular, Diplomat or Fellow Membership for at least five (5) consecutive years, with no lapses, prior to the current election?  Yes  No
- B.2.5. Are you physically, psychologically and morally fit?  Yes  No
- B.2.6. Are you practicing as a Medical Technologist/ Medical Laboratory Scientist for at least five (5) consecutive years, with no lapses prior to the current election in any of the following areas of practice: clinical laboratory, academe and other specialization related to healthcare; a combination of practice from the different areas is acceptable, provided, that for chapters, years of experience shall be at least two (2) consecutive years.  Yes  No



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B.2.7. Are you employed or residing in the locale where you are seeking a position as a member of the Board of Directors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.8. Are you a holder of an immigrant visa at the time of application for candidacy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.9. Have you been convicted or have a pending criminal, civil, or administrative case before any court, the PAMET Committee on Ethics or in your workplace?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.10. Have you been found guilty of any offenses and given sanction by PRC and/or PAMET Committee on Ethics?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.11. Have you been previously removed from the PAMET Board for any cause?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.12. Do you have a record of gross violations of the PAMET By – Laws, Code of Ethics and Election Code?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.13. Have you been part or instrumental in any illegal act or misrepresentation damaging to the reputation, name and image of the Association?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.14. Are you a member or officer of any other party, group, or organization of Medical Technologists/ Medical Laboratory Scientists with no conflict of interest with PAMET, direct or indirect?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.15. Are you a part of any party, group, or organization that is identical or deceptively or confusingly similar with PAMET or is patently deceptive, confusing, or contrary to the existing organization?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.16. Are you an incumbent Regional Director or an Officer or a Board of Director of any chapter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B.2.17. Do you have any pending or unsettled major obligations with the Association?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>B.3. I hereby declare that I have the time and capacity for the performance of duties and obligations as Director/ Officer of PAMET such as, but not limited to –</b>		
➤ Attendance to regular monthly Board Meetings and other special meetings	<input type="checkbox"/> Yes	<input type="checkbox"/> No
➤ Active participation in different activities of the Association	<input type="checkbox"/> Yes	<input type="checkbox"/> No
➤ Diligent discharge of assigned tasks and responsibilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
➤ Maintenance of harmony and team work within and outside the Board	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>I also declare to uphold the Constitution and By – Laws of PAMET and of the Code of Ethics of the profession.</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No





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### **IMPORTANT :**

1. **Management Consent**, as shown in Item D of the Certificate of Candidacy (COC), should be obtained from the immediate head or any member of senior management from the place of work.
2. The completely accomplished COC should be accompanied by the following **support documents**:
  - (a) Photocopy of the latest and valid PRC ID Card (i.e., front and back side of the ID) ;
  - (b) Photocopy of the 2021 PAMET ID Card (i.e., front and back side of the ID); and
  - (c) a recent 2 x 2 colored picture.
3. The completely accomplished COC shall be saved in pdf, accompanied with the required pertinent supporting documents and must be emailed to official email address of the Committee on Elections [pametcomelec@gmail.com](mailto:pametcomelec@gmail.com) not later than 3 P.M. of November 5, 2020 for sufficient screening of candidates by the COMELEC.

**Incomplete COC** (i.e., improperly accomplished or do not have the required pertinent support documents) will **automatically be invalidated**.

4. Accepted/qualified candidates are expected to be -
  - (a) registered as full-conference-delegate and;
  - (b) virtually present during the presentation of candidates to the membership on November 25, 2020, 12:00nn during the opening ceremonies.
5. The COMELEC will prepare a summarized information sheet on all accepted/qualified candidates to be posted and made available in the website one week before the Election.