

# THE PHILIPPINE BOARD OF PERIODONTOLOGY

## DIPLOMATE EXAMINATIONS ATTESTATION \*

I hereby apply to The Philippine Board of Periodontology to take the Qualifying (Written Part 1) and thereafter, the Clinical Proficiency (Oral Part 2) and Diplomate Certifying (Oral Part 3) Examinations in accordance with and subject to the procedures and regulations set by the Board and as written in the Diplomate Guidelines. I agree to disqualification from the examination, in the event that I make any false representations to the Board, withhold any material information, or violate any rules, or regulations governing the Examination. I further agree that the Board may revoke my certification if it subsequently discovers that I made a false representation, withheld material information, or violated any rules or regulations of the Board.

I understand that the Board requires to keep all test questions confidential so that they will not become available to future examinees, who may thereby receive an unfair advantage. I further understand that this examination is a copyrighted work of the Board and that copying of any question(s) in any form constitutes an infringement of the Board's copyright and a violation of its regulations.

I understand that it is the policy of the Philippine Board of Periodontology to evaluate every candidate solely on the merits of the candidate's application and performance in the examinations. I understand that it is the policy of the Board not to tolerate any form of discrimination or harassment.

I hereby agree to hold The Philippine Board of Periodontology, its members, examiners, officers, and agents free from any complaint, claim, or damage arising out of any action or omission by any of them in connection with this application, any examination given by the Board, and any grade relating thereto.

I also understand that if I fail to appear for the Qualifying Examination without having provided a timely notice of withdrawal, I will have to restart the application process by submitting a new completed application, attestation, and credential forms and fees. In addition, I understand the policies relating to withdrawal and failure to appear in the oral examinations and fees as written in the Diplomate Guidelines and the time limits in completing the Diplomate process.

I understand that the Philippine Board of Periodontology will attempt to administer the Written and Oral Examinations as scheduled. Should the Philippine Board of Periodontology be prevented from administering or completing any of the Examinations at the appointed time and location or should the Board nullify any of the Examinations based on suspected, unprofessional activity or other irregularity, the Board will not be responsible for any expense that I incur, in connection with the Examination and any substitute Examination.

I understand that once I become a Diplomate, I will be a member (if I haven't done so) of the Philippine Society of Periodontology and maintain my membership in good standing.

**I HAVE READ AND UNDERSTOOD THIS STATEMENT AND THE PBP DIPLOMATE GUIDELINES AND AGREE TO BE LEGALLY BOUND BY IT.**

Date \_\_\_\_\_ Signed \_\_\_\_\_

(Sign over printed name and PRC number)