

**APPLICATION FOR FPCR STATUS**

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| Last Name: First Name Middle Name  |
| Hospital: |
| Email Address |
| Mobile Phone: |
| Date Submitted: |

*Enclosed in this long brown envelope are the following:*

 1.Filled-up Member Information Sheet with my recent 2 passport pictures

2. l 2. Letter of application address to Membership Committee head, **Dr. Christine Susean S. Sagpao**

3. 3. Endorsement letters of 2 radiologists of good standing

 4. Photocopy of my certificate as diplomate of the PCR

5.Form RC 004 attesting that my scientific paper is accepted and approved by the

 Research Committee

 6. PMA Certificate of good standing

 7. PCR dues should be updated

 8. DPBR member in good standing (To include Certificate of Good Standing from your

 chapter; all PCR members must be a member of one chapter)

\*Oath-taking during Induction Night is a pre-requisite to being awarded FPCR status.

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Applicant’s Signature

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_