



Outstanding Sillimanian Award

Silliman University, Dumaguete City, 6200 Philippines

NOMINATION PORTFOLIO OF

(NAME OF NOMINEE)

2024 Outstanding Sillimanian Award



Outstanding Sillimanian Award

Silliman University, Dumaguete City, 6200 Philippines

NOMINATION FORM

2"x 2" picture

Nominee	
in the field of	
	Specialization

Based on the Criteria, I hereby submit the above nominee's complete Nomination Portfolio.

Signature of President/Representative of Nominating Chapter
Name of President/Representative of Nominating Chapter

2024 Outstanding Sillimanian Award



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NOMINATING CHAPTER

Name of Chapter	
Name of Chapter President/Representative	
Address	
Contact Number(s)	
E-mail Address	
Permission from the nominee has been obtained: (Kindly check the box)	
Yes	<input type="checkbox"/>
No	<input type="checkbox"/>



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CHAPTER BOARD RESOLUTION

2024 Outstanding Sillimanian Award



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ATTESTATION

I attest to all facts contained in this form and give permission for these to be used for publication. Also, I give my consent to Silliman Alumni Association, Inc. and Silliman University to independently verify the facts contained in this form.

I understand that if selected as one of the Outstanding Sillimanian Awardees for the year 2024, I am obligated to attend the awards presentation on August 28, 2024 and other activities that require the presence of the awardees, unless extreme circumstances (i.e. accident, death, force majeure, etc.) warrant my absence. Furthermore, in case I will not be able to attend, I understand that I cannot let a representative receive the Award in my place.

(Printed Name and Signature)



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CURRICULUM VITAE

PERSONAL INFORMATIONError! Not a valid link.

ACADEMIC HISTORYError! Not a valid link.

PROFESSIONAL EXPERIENCE

Job Title	Organization	Dates of Employment	Summary of Experience and Achievements

AWARDS AND HONORS

Name of Award	Year Received	Awarding Body

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PROFESSIONAL OUTPUT

A. PUBLICATIONS

Full Citation of Publication

B. PRESENTATIONS

Title	Date	Venue

C. SIGNIFICANT WORKS IN NOMINATED FIELD

Full Description of Significant Works



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GRANTS AND SCHOLARSHIPS

Grants/Scholarships	Date Awarded	Awarding Institution

LICENSES AND CERTIFICATIONS

Licenses/Certifications	Date Earned	Awarding Institution

PROFESSIONAL ASSOCIATIONS

Name of Organization	Location/Chapter	Dates of Active Membership



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TESTIMONIAL

Name			
Address			
Contact nos.		Signature	

Each testimonial from three (3) disinterested persons and not related up to the sixth degree by affinity or consanguinity should not exceed 1,000 words. This can be sent directly through email to saai@su.edu.ph or by courier to the OSA Committee, Silliman Alumni Association, Inc., Silliman University, Dumaguete City. Submit this form in a sealed envelope and signed across the flap.



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VIA VERITAS VITA PROFILE

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Republic of the Philippines)
City of _____) S. S

SWORN STATEMENT

I, _____, of legal age, single/married with postal residence address at _____, after having duly sworn to in accordance with law, hereby depose and state that:

1. That I am a nominee for the 2024 Outstanding Sillimanian Award;
2. That I have not been convicted of any criminal offense and that there is no pending complaint against me before the Office of the Ombudsman, any Prosecutor's Office, Department of Justice, or any regular courts or the Court of Appeals and the Supreme Court; or administrative case before any government office or private entity;
3. I am executing this sworn statement to lend to the veracity of the foregoing statement and for whatever legal purpose or purposes that it may serve.

AFFIANTS FURTHER SAYETH NAUGHT.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ of _____ at _____, Philippines.



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PROOF OF SAAI LIFETIME MEMBERSHIP

2024 Outstanding Sillimanian Award



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