



SWORN STATEMENT

I hereby swear and attest that I have not enrolled as a 1st year level student in any College of Medicine prior to my application to the De La Salle Medical and Health Sciences Institute College of Medicine. Also, I hereby swear that I have not been charged with or involved in any criminal offense in the past and attest to the veracity and accuracy of all information given by me in the course of my interview relevant for my application to the De La Salle Medical and Health Sciences Institute – College of Medicine.

Furthermore, I am fully aware that I should be excluded from the College, regardless of my academic year or status, should any of that said information be eventually discovered or verified untrue.

Signature of Applicant over Printed Name

Date: _____

WITNESS: _____
Signature over Printed Name