

University of Cebu

College of Aledicine Foundation, Inc. to all persons whom these may come

Greetings

Be it known that the Board of Trustees, by authority of the Republic of the Philippines, and on recommendation of the Faculty, has conferred upon

Sarah Aurora Warque Tabada

who has fulfilled all the requirements therefore, the Degree of

Poctor Of Medicine

with all the rights, honors, and privileges as well as the obligations and responsibilities thereunto appertaining
In testimony whereof, we have hereto subscribed our names and affixed the seal of the School In Mandaue City, Philippines, this 26th day of June, 2019.

DR. MA. MELFER R. MONTOYA

S.O. No. 70-500601-0257 s. 2019 DATED: June 21, 2019 President

SN: 000041





UNIVERSITY OF CEBU COLLEGE OF MEDICINE FOUNDATION, INC.

university of cebu S C H O O L O F M E D I C I N E



OFFICIAL TRANSCRIPT OF RECORDS

PERSONAL DATA

NAME TABADA, SARAH AURORA WARQUE

SEX FEMALE

COLLEGE OF

FEBRUARY 18, 1995 BIRTH DATE

BIRTHPLACE ORMOC CITY NATIONALITY FILIPINO

ROMAN CATHOLIC RELIGION

PARENT/GUARDIAN : MA. AURORA TERESITA W. TABADA

PERMANENT ADDRESS: APT 5, VISCA, BAYBAY CITY, LEYTE

: MAY 14, 2015 DATE ADMITTED : MEDICINE

: HD/UP, NMAT , NSO,GMC, DP ENTRANCE DATA

PRELIMINARY EDUCATION

ELEMENTARY:	VISCA FOUNDATION ELEMENTARY SCHOOL	YEAR	:
HIGH SCHOOL:	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	YEAR	:2011
COLLEGE:	UNIVERSITY OF THE PHILIPPINES- CEBU	YEAR	:2015

GRADING SYSTEM

GRADE	INDICATION	GRADE	INDICATION
1008-908	EXCELLENT	W	WITHDRAW
85%-89%	VERY GOOD	NC	NO CREDIT
80%-84%	GOOD	NG	NO GRADE
758-798	SATISFACTORY	DR	DROPPED
75% BELOW	FAILED	NA	NO ATTENDANCE

REMARKS: FOR BOARD EXAMINATION PURPOSES

DATE ISSUED: 02/27/2020

SHEENA 7

ESA M. BESABELLA

CHECKED BY:

ANECITA L. AGUILAR, MBA

REGISTRAR

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NO. 008458 PAGE: 1

PREPARED

Tel. No. 232-1525 • Fax No. 232-1525 • Ouano Avenue, Subangdaku, Mandaue City. uccollegeofmed@gmail.com



UNIVERSITY OF CEBU COLLEGE OF MEDICINE FOUNDATION, INC.

SCHOOL OF MEDICINE



OFFICIAL TRANSCRIPT OF RECORDS

	ARAH AURORA WARQUE		
COURSE NO.	DESCRIPTIVE TITLE	FINAL	CREDIT
	YEAR LEVEL 1 SY: 2015-2016		
ANA	GROSS ANATOMY AND DEVELOPMENTAL		
	ANATOMY	84	342 HRS
HISTO	HISTOLOGY	76	228 HRS
PHYSIO	PHYSIOLOGY	79	
BIOCHEM	BIOCHEMISTRY, MOLECULAR BIOLOGY,		
	GENETICS AND NUTRITION	76	228 HRS
PFCM 1	PREVENTIVE FAMILY AND COMMUNITY		
	MEDICINE 1	88	76 HRS
NEUROANA	NEUROANATOMY	80	80 HRS
RESEARCH 1	BASIC HEALTH RESEARCH 1	GOOD	95 HRS
FOM	FOUNDATIONS OF MEDICINE	GOOD	54 HRS
	YEAR LEVEL 2 SY: 2016- 2017		
MED 1	INTRODUCTION TO CLINICAL MEDICINE	81	190 HRS
GEN PATH	GENERAL PATHOLOGY	82	380 HRS
MICRO	MICROBIOLOGY	80	190 HRS
PSYCHIA 1	PSYCHIATRY 1	79	38 HRS
LEGAL MED	LEGAL AND FORENSIC MEDICINE	85	38 HRS
SURG 1	SURGERY 1	75	76 HRS
MED JURIS	MEDICAL JURISPRUDENCE	81	38 HRS
PFCM 2	PREVENTIVE FAMILY AND COMMUNITY		
	MEDICINE 2	77	76 HRS
	PHARMACOLOGY AND THERAPEUTICS	75	190 HRS
PARA	PARASITOLOGY	77	152 HRS
RESEARCH 2	APPLIED HEALTH RESEARCH 1	GOOD	

(MORE ENTRIES NEXT PAGE)

REMARKS:

FOR BOARD EXAMINATION

DATE ISSUED: 02/27/2020

ANECITA L. AGUILAR, MBA
REGISTRAR

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FAGE: 2



UNIVERSITY OF CEBU COLLEGE OF MEDICINE FOUNDATION, INC. SCHOOL OF MEDICINE

OFFICIAL TRANSCRIPT OF RECORDS

NAME: T	ABADA,	SARAH	AURORA	WARQUE
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COURSE NO.	DESCRIPTIVE TITLE	FINAL	CREDIT
	YEAR LEVEL 3 SY: 2017-2018		
MED 2	INTERNAL MEDICINE	75	228 HRS
PEDIA	PEDIATRICS	75	228 HRS
SURG 2	SURGERY 2	75	171 HRS
OB-GYN	OBSTETRICS & GYNECOLOGY	79	114 HRS
NEURO	NEUROLOGY	75	57 HRS
ENT	OTORHINOLARYNGOLOGY	83	76 HRS
RADIO	RADIOLOGY & IMAGING STUDIES	83	38 HRS
PMR	PHYSICAL MEDICINE & REHABILITATION	87	57 HRS
PSYCHIA 2	PSYCHIATRY 2	75	38 HRS
OPHTHA	OPHTHALMOLOGY	87	76 HRS
ORTHO	ORTHOPEDICS	75	38 HRS
PFCM 3	PREVENTIVE FAMILY & COMMUNITY		
	MEDICINE 3	75	114 HRS
CLINICS	CLINICS	SATISFACTORY	228 HRS
RESEARCH 3	APPLIED HEALTH RESEARCH 2	VERY GOOD	76 HRS

YEAR LEVEL 4 SY: 2018-2019

CLINICAL CLERKSHIP (JUNE 1, 2018- MAY 31, 2019) 52 WEEKS ROTATION

DEPARTMENT	OF	INTERNAL MEDICINE	SATISFACTORY	2	MONTHS
DEPARTMENT	OF	PEDIATRICS	SATISFACTORY	2	MONTHS
DEPARTMENT	OF	PREVENTIVE FAMILY & COMMUNITY MEDICINE	SATISFACTORY	2	MONTHS
DEPARTMENT	OF	OBSTETRICS & GYNECOLOGY	SATISFACTORY	2	MONTHS
DEPARTMENT	OF	SURGERY	SATISFACTORY	2	MONTHS
DEPARTMENT	OF	OPHTHALMOLOGY	SATISFACTORY	1	5 DAYS
DEPARTMENT	OF	ENT	SATISFACTORY	1	5 DAYS
DEPARTMENT	OF	PSYCHIATRY	SATISFACTORY	1	0 DAYS
DEPARTMENT	OF	DERMATOLOGY	SATISFACTORY	1	0 DAYS
DEPARTMENT	OF	PHYSICAL MEDICINE & REHABILITATION	SATISFACTORY	1	0 DAYS

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(MORE ENTRIES NEXT PAGE)

REMARKS:

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ANZCITA L. AGUILAR, MBA REGISTRAR

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PAGE: 3



UNIVERSITY OF CEBU COLLEGE OF MEDICINE FOUNDATION, INC. SCHOOL OF MEDICINE



OFFICIAL TRANSCRIPT OF RECORDS

NAME: TABADA, SARAH AURORA WARQUE ______

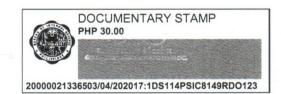
COURSE NO. ______

DESCRIPTIVE TITLE

FINAL CREDIT

GRADUATED FROM THE FOUR-YEAR COURSE IN MEDICINE WITH THE DEGREE OF DOCTOR OF MEDICINE AS OF JUNE 26, 2019 PER SPECIAL ORDER (B) NO. 70-500601-0257 s. 2019 DATED JUNE 21, 2019 ISSUED BY THE COMMISSION ON HIGHER EDUCATION, REGION VII, CENTRAL VISAYAS, CEBU CITY.

(TRANSCRIPT CLOSED. ANY ENTRY BELOW THIS LINE IS NULL AND VOID.)



REMARKS:

FOR BOARD EXAMINATION

DATE ISSUED: 02/27/2020

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/ PAGE:

REGISTRAR

AMECITA L. AGUILAR, MBA



UNIVERSITY OF CEBU COLLEGE OF MEDICINE FOUNDATION, INC. S C H O O L O F M E D I C I N E



Work.	HO.			(Copy for OCRG)	
E	Mulicipal Form No. 102 Revised January 1993)	(To be accomplis	shed in quadrupiicate)	REMARKS/ANNOTATION	
la same	Republic of the	Philippines		1.5	
	CERTIFICATE OF	LIVE BIRTH	H		
	(Fill out completely, accurately and le Place X before the appropriate answe	egibly. Use ink or typewi or in Items 2, 5a, 5b and	riter. 19a.)		
	Province LEYTE	R	egistry No. 95-703		
	City/Municipality ORMOC 1. NAME (First)	(Middle)	(Last)	FOR OCHG USE ONLY	
	SAHAH AURCRA	WARQUE	TABADA	Population Reference No.	
	Later Annual State of the Control of	DATE OF BIRTH	(day) (month) (year)	- 30 -ANADIS	
	1 Male2 Female C 4. PLACE OF (Name of Hospita/Volinio/Institut	tion/ (City/Municipa	18 February 199	TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR	
	H House No., Street, Barangay)	Grity/Municipal	arty) (Province)	and the second	
	HOSPITAL	ORMOO C		12V 1010121013	
J.	D Sa. TYPE OF BIRTH b.	IF MULTIPLE BIRT	2 Second		
	c. BIRTH ORDER (live births and fetal deaths	3 Other	rs, Specify	48	
	c. BIRTH ORDER (live births and setal deaths including this delivery) (first, second, third, etc.)	d. WEIGHT	.75	Ш.	
		(Middle)	(Last)	497 30	
No.	NAME MA. AURORA RERESIT	•	WARQUE	RESIDERY	
	7. CITIZENSHIP	8. RELIGIO			
1	M Fil. O 9a. Total number of b. No. of children		No. of children	56 37387	
	T children born living including this birth:		born alive but are now dead: 0	12/12/9/1	
1	E 10. OCCUPATION	11.	Age at the time	61	
	R Researher/ VISCA		of this birth: 32 years		
,	12. RESIDENCE (House No., Street, Barangay)	. (City/Municipal			
	13. NAME (First)	Baybay (Middle)	Leyte (Last)	0/3 3/7/	
	F	EVERESE	TABADA		
	T 14. CITIZENSHIP	15. RELIGI		06 69	
	H FIL. E 16. OCCUPATION	UCCP	Age at the time		
	PROFESSOR/ Visca		of this birth: 39 years	70 72 74	
	 DATE AND PLACE OF MARRIAGE OF I Acknowledgment/Admission of Palernity at the 	PARENTS (If not m	arried, accomplish Affidavit of	03 04 00	
	November 18, 1984 @ Sacred He		Cebu City		
	19a. ATTENDANT		200	749 35	
-	1 Physician 4 Hilot (Traditional Midwife)	_ 2 Nurse _ 5 Others (Specify	3 Midwite		
	19b. CERTIFICATION OF BIRTH ! hereby certify that I attended the bigth of the c	thild who was have alies	at 8:40 pm o'clock		
	am/pm on the date stated above.			2/2/1/ K' V	
1	Signature		MATERNITY &	87	
1	Date or Position OB- GYNE	Date 02/1			
	20. INFORMANT + 1				
1	Signature The August 7 11 Told Area	Monday -	, Visca, Baybay	7/33 39	
	Name in Print MA. A. WORLA T. W. THE ACA Relationship to the child	Date 02/20/	95		
	21. PREPARED BY		O AT THE OFFICE OF	<u>85</u>	
1	n. ft.	THEICI	VIL REGISTRAR		
	Name in Print AMELITA R. ARTIGAS, I	R.Mame in PrinARC	HILLASOSILVA	2-17	
1	Title or Position	Title or Position	ITI CIVIL REGIS		
1	Date02/20/95	Date	2/20/95	7	
			0		
	-999OLM-02264-BI001	BReN		Lisa Draco S. P.	ensal
OSSIBLE IMAGE		03738-A95E		LISA GRACE S. BERSALES	
		Description	Na Na	ational Statistician and Civil Reg	,
638999022640	092015001	Documer Stamp Tax	itary	Philippine Statistics Auth	
		ip i a/			

CERTIFIED TRUE COPY February 27, 2020

University Registrar
UNIVERSITY OF CEBU COLLEGE OF
MEDICINE



UNIVERSITY OF CEBU COLLEGE OF MEDICINE FOUNDATION, INC. S C H O O L O F M E D I C I N E



363820



COMMISSION ON HIGHER EDUCATION

NATIONAL MEDICAL ADMISSION TEST

1111400398

TABADA, SARAH AURORA WARQUE

Apt 5, Kilbourne St. Visca, Brgy. Pangasugan 6521 Baybay, Leyte Rec 7269

ERF NMAT_1013

November 23, 2014

APTITUDE	STANDARD SCORE
Verbal	585
Quantitative	597
Inductive Reasoning	545
Perceptual Acuity	427
APT Composite	558

SPECIAL AREA	STANDARD SCORE
Biology	653
Physics	427
Chemistry	625
Social Science	611
SA Composite	601

PERFO	ERAL RMANCE ORE
STANDARD SCORE	PERCENTILE RANK

Refer to the back for a brief description of the scores and ratings.

Keep this copy of your report. You will be required to present this when you apply for admission to any of the medical schools in the Philippines.

CERTIFIED TRUE COPY February 27, 2020

ECITA L. AGUILAR, MBA

University Registrar
NIVERSITY OF CEBU COLLEGE OF

MEDICINE



UNIVERSITY OF CEBU COLLEGE OF MEDICINE FOUNDATION, INC. S C H O O L O F M E D I C I N E





University of Cebu

College of Aledicine Foundation, Inc. to all persons whom these may come

Greetings

Be it known that the Board of Trustees, by authority of the Republic of the Philippines, and on recommendation of the Faculty, has conferred upon

Sarah Aurora Warque Tabada

who has fulfilled all the requirements therefore, the Degree of

Poctor Of Medicine

with all the rights, honors, and privileges as well as the obligations and
responsibilities thereunto appertaining

In testimony whereof, we have hereto subscribed our names and affixed the seal of the School
In Mandaue City, Philippines, this 26th day of June, 2019.

DR. MA MELFER R. MONTOVA

S.O. No. 70-500601-0257 s. 2019 DATED: June 21, 2019 ATTY. AUGUSTO W. GO President

SN: 000041

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University Registrar
ERSITY OF CEBU COLLEGE OF
MEDICINE



NIVERSITY OF CEBU COLLEGE OF MEDICINE FOUNDATION, INC.





SCHOOL OF MEDIC



MAXIMO C. ALJIBE, Ph.D., DPM, CESO III

Director IV

Commission on Higher Education

Region VII

National Government Center, Sudlon Lahug, Cebu City

This institution favorably recommends the candidate for graduation upon satisfactory completion of the course leading to the degree of Doctor of Medicine as of June 26, 2019, to wit:

FEMALE TABADA, SARAH AURORA W. (Valid for 1 student only)

The above mentioned student last enrolled in the Second Semester, Academic Year 2018-2019 and the degree program is covered by Government Recognition No. <u>003</u> series <u>2019</u>

Very truly yours,

June 07,2019

mun 5 CITA L. AGUILAR, MBA Registrar



Republic of the Philippines Office of the President COMMISSION ON HIGHER EDUCATION Region VII e-mail:chedro7@ched.gov.ph



SPECIAL ORDER

June 21, 2019

On the basis of the records submitted by the University of Cebu College of Medicine Foundation, Inc. , the graduation of the student Female SARAH AURORA W. TABADA with the degree of Doctor of Medicine of June 26, 2019, is hereby approved and made a matter of record. The approval of graduation of the above-mentioned student is AUTOMATICALLY REVOKED if the requirements of the program are not completed within the term specified and is SUBJECT TO CANCELLATION if the records that served as the basis of approval are later found incorrect and not in order.

> MAXIMO C. ALJIBE, Ph.D., DPM, CESO III Director IV

Not valid Without Seal or with Alteration or erasure

Form IX Checked /Verified by Evaluated by Reviewed by Documentary Stamp Tax O.R. No. O.R. Date

CERTIFIED TRUE COPY February 27, 2020

rodo V'ANECITA L. AGUILAR MBA University Registrar UNIVERSITY OF CEBU COLLEGE OF MEDICINE