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CERTIFICATE OF ACCEPTANCE OF THESIS/DISSERTATION

The thesis/dissertation attached hereto, entitled _____

prepared and submitted by _____, in partial fulfillment of the
name of student

requirements for the degree of _____ is accepted.
program/track/major

Thesis/Dissertation Adviser

Accepted as partial fulfillment of the requirements for the degree of

Dean

College of _____

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Date _____

Carl Abelardo T. Antonio, MD, MPH

Director

National Graduate Office for the Health Sciences

University of the Philippines Manila

Date _____