

## PPS Application as PPS-AHMOPI Participating Pediatrician [Form 2]

(PPS Chapter / Hospital)

List of PPS members who have read and understood the terms of the PPS-AHMOPI MOA and agreed to be participating pediatricians

PPS Members	PPS Status	PRC Lic. No.	TIN	Signature
Name (Family, Given, MI	(Diplomate/ Fellow)			

**Signature over Printed Name** 

(PPS Chapter President/Department Chair)