



Republic of the Philippines
DEPARTMENT OF EDUCATION
 Region VII, Central Visayas
SCHOOLS DIVISION OF NEGROS ORIENTAL
Office of the Curriculum and Implementation Division
 Capitol Area, Dumaguete City

www.depednegor.net negros.oriental@deped.gov.ph (035) 225 1622

Division Memorandum

No. 768 s. 2017

To : Assistant Schools Division Superintendent
 Division Education Program Supervisors/DICs
 Elementary & Secondary School Heads
 All Others Concerned

From : **SALUSTIANO T. JIMENEZ, CESO VI** ✓
 OIC-Office of the Asst. Regional Director
 Concurrent Schools Division Superintendent
 12/27/17

Date : December 27, 2017

Subject : **CONDUCT OF 2017 ACCREDITATION AND EQUIVALENCY (A & E) TEST REGISTRATION**

The Department of Education (DepEd), through the Bureau of Education Assessment (BEA) will conduct the 2017 Accreditation and Equivalency (A & E) Test Registration in two levels: elementary and junior high school.

To ensure the smooth conduct of the 2017 A&E Test Registration, the **DepEd Negros Oriental Division**, Capitol Area, Dumaguete City is identified as the **Test Registration Center**. The following consists the Test Registration Committee:

Donre B. Mira, Ed. D. – Education Program Supervisor-ALS	Test Registration Officer
Dennis Charles F. Andalajao- Senior Education Program Specialist- M & E	Co-registrar
Arlene A. Pepito- Education Program Specialist	Support staff
Joy Emily A. Tanio- Education Program Specialist	Support staff
Francis C. Austero- Education Program Specialist	Support staff

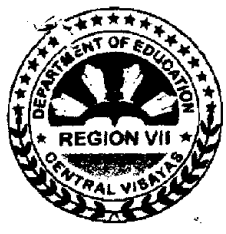
Interested applicants for 2017 A & E Test for elementary and junior high school must register and comply the all requirements at the Test Registration Center from 8:00 am to 5:00 pm on or before January 5, 2018.

For more details, see attached communication. Should there be any query on this matter, please contact Donre B. Mira at cellphone number 0916 569 4330.

For your information and widest dissemination.

28 Dec 2017

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REPUBLIKA NG PILIPINAS
REPUBLIC OF THE PHILIPPINES
KAGAWARAN NG EDUKASYON
DEPARTMENT OF EDUCATION
REHIYON VII, GITNANG VISAYAS
REGION VII, CENTRAL VISAYAS
Sudlon, Lahug, Cebu City



D: 12/11/17
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REGIONAL MEMORANDUM
NO. 0964, s. 2017

DEC 11 2017

REGISTRATION PERIOD FOR THE 2017 COMPLETERS OF THE ALTERNATIVE LEARNING SYSTEM (ALS) PROGRAM

To: **Schools Division Superintendents**
All Others Concerned

1. The Department of Education (DepEd), through the Bureau of Education Assessment (BEA), announces the registration period for the 2017 Completers of the Alternative Learning System (ALS) Program.
2. For further details, see enclosures.
3. Immediate dissemination of and compliance with this Memorandum is directed.

Juliet A. Jeruta
JULIET A. JERUTA
Director III
Officer-in-Charge
Office of the Regional Director

IAJ/EBE/m²

Office of the Director (ORDr), Tel. Nos.: (032) 231-1433; 231-1309; 414-7399; 414-7325; Office of the Assistant Director, Tel. No.: (032) 255-4542
Field Technical Assistance Division (FTAD), Tel. Nos.: (032) 414-7324 Curriculum Learning Management Division (CLMD), Tel. Nos.: (032) 414-7323
Quality Assurance Division (QAD), Tel. Nos.: (032) 231-1071 Human Resource Development Division (HRDD), Tel. No.: (032) 255-5239
Education Support Services Division (ESSD), Tel. No.: (032) 254-7062 Planning, Policy and Research Division (PPRD), Tel. Nos.: (032) 233-9030;
414-7065 Administrative Division, Tel. Nos.: (032) 414-7326; 414-4367; 414-7366; 414-7322; 414-4367
Finance Division, Tel. Nos.: (032) 256-2375; 253-8061; 414-7321

"EFA 2015: Kanapaton ng Lahat, Pananagutan ng Lahat"



DEPARTMENT OF EDUCATION
OFFICE OF THE UNDERSECRETARY

19 OCT 2017

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Republic of the Philippines
Department of Education

DepEd Complex, Meralco Avenue, Pasig City, Philippines
Direct Line: (632) 633-7202/687-4146 Fax: (632) 631-5057
E-mail: lorna.dino@deped.gov.ph Website: www.deped.gov.ph

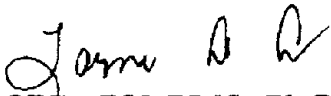


Undersecretary for Curriculum and Instruction

MEMORANDUM

DM- CI- 2017- 00359

TO: Bureau and Service Directors
Regional Directors
Schools Division Superintendents
Division Testing Coordinators
ALS Focal Persons/Coordinators
All Others Concerned

FROM: 
LORNA DIG-DINO, Ph.D.
Undersecretary for Curriculum and Instruction

SUBJECT: **Registration Period for the 2017 Completers of the Alternative Learning System (ALS) Program**

DATE: October 18, 2017

The Department of Education (DepEd), through the Bureau of Education Assessment (BEA), announces the registration period for the 2017 Completers of the Alternative Learning System (ALS) Program.

CONDUCT OF THE A&E TEST REGISTRATION

1. Who will and when to register?	Starting on December 1, 2017 to January 12, 2018, 2017 ALS Program Completers may register for the A&E Test which will be administered on February 11, 2018 for Luzon and on February 18, 2018 for Visayas and Mindanao. 2017 ALS Program Completers without LRN may register as long as they have Certificate of ALS Program Completion issued by their Learning Facilitator and verified by the Registration Committee. For those who wish to take A&E Test for junior high school level without elementary certificate, they shall be advised to take certification for elementary level first.
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2. Where to register?	Schools Division Offices (SDOs) and District Offices (DOs) identified by the Schools Division Superintended (SDS) shall serve as registration centers.
3. What are the documents needed for registration?	<p>Registration requirements are as follows:</p> <ol style="list-style-type: none"> 1. Original and Photocopy of Certification of ALS Program Completion issued by the Learning Facilitator (<i>For ALS Learners only</i>) 2. Original and Photocopy of Birth Certificate (NSO/PSA); 3. If copy of Birth Certificate from the Philippine Statistics Authority (formerly National Statistics Office) is not available, any of the following documents can be presented: <ol style="list-style-type: none"> i. Baptismal Certificate; ii. Voter's ID (with picture and signature); iii. Valid Passport; iv. Valid Driver's License; and v. Any legal document bearing the applicant's picture, name and signature (e.g. NBI Clearance, Barangay certificate, certification issued by barangay leaders/chieftain or learning facilitator) 4. Two 1x1 identical ID Photo (white background with name tag)
4. Will there be a portfolio assessment?	In compliance with DepEd Memorandum 121, s. 2017, portfolio assessment will not be required for A&E Test on February 2018 and will not be a part of the final rating. Hence, the test is multiple-choice type only. The passing rate is still 75% as per D.O. 55, s. 2016.
5. How to register?	<p>The test applicant shall:</p> <ol style="list-style-type: none"> 1. go to the designated Registration Center and secure a registration form from the Registration Committee; 2. personally accomplish the Registration Form; 3. present the accomplished Registration Form, together with the complete requirements to the Registration Committee for evaluation and verification; 4. receive the applicant's copy (lower portion of the registration form) for safekeeping and presentation to the room examiner on the testing day.

	<p>Learning facilitators may gather applicants from far-flung areas in one assembly and assist them in the registration. They shall secure the accomplished forms and the required documents for submission to the Registration Committee in the SDO or DO. After the evaluation of documents, learning facilitators shall keep all the applicants' copy to be given to the examinees a day before or on the testing day. This is to avoid misplacement of applicant's copy which is needed to present on the testing day. Non-DepEd ALS Program Providers may also adapt this procedure to facilitate the registration of their learners.</p> <p><u>NO PAYMENT SHALL BE COLLECTED</u> by anyone involved in the A&E Test Registration, Administration and issuance of certificate of rating.</p>
<p>6. What is the composition of the Registration Committee and its functions?</p>	<p>The SDS shall designate a Registration Committee, which consists of a Registration Officer, a co-registrar and a support staff. They should have experience in the conduct of BEA testing program.</p> <p>The committee will manage the registration process, including the evaluation and verification of the submitted documents. Specifically, the committee will:</p> <ol style="list-style-type: none"> a. report to the Registration Center from December 1, 2017 to January 12, 2018 from 8:00 AM to 5:00 PM; b. interview the prospective applicants to determine if they are qualified to register; c. distribute the registration forms to qualified applicants; d. explain how the registration form will be accomplished (but will not accomplish it for the applicant); e. check if the registration forms are duly accomplished by the applicant, making sure that there are no blank spaces and errors in the form; f. certify that all information supplied in the registration form are based on the submitted documents; g. report to the Division Testing Coordinator (DTC) any applicants with incomplete requirements or questionable documents;

	<p>h. fill out the name of the testing center in the registration form;</p> <p>i. detach the lower part of the registration form and return it to the registrant for use as an admission document on the testing day;</p> <p>j. group the registrants into Elementary and Junior High School Levels and prepare the master list of registrants per testing center (30 examinees/room); and</p> <p>k. sign and submit the master list to the DTC.</p> <p>Expenses for the reproduction of registration forms shall be charged against the contingency funds in the budget estimate to be prepared by the DTC based on the actual number of registrants. The budget estimate shall be submitted to BEA thru courier on or before January 17, 2018.</p> <p>The DTC shall use the Enclosure No. 4 in preparing the list of testing centers and the total of examinees per level. The copy of this report, in MS Excel format, shall be submitted to BEA thru bea.ead@deped.gov.ph by the DTC on or before January 15, 2018.</p>
<p>7. Who else can help the applicants in the registration process and how?</p>	<p>ALS mobile Teachers and ALS Coordinators/Focal persons in the SDOs and DOs may help in the dissemination of information and distribution of registration form. They are also requested to facilitate the issuance of Certificate of ALS Program Completion for ALS Learners.</p>
<p>8. Who will monitor/supervise the registration?</p>	<p>The Regional Testing Coordinators (RTCs) and the DTCs will monitor the registration process in the SDOs and DOs.</p>
<p>9. What are the forms to be accomplished?</p>	<p>Enclosure No. 1 – Registration form; to be accomplished personally by the applicant.</p> <p>Enclosure No. 2 – Certification of ALS Program Completion; to be issued by the learning facilitator to his/her individual learner.</p> <p>Enclosure No. 3 – List of Registrants; to be accomplished by the Registration Committee.</p> <p>Enclosure No. 4 – List of Testing Centers; to be accomplished by the DTC.</p>

Immediate dissemination of this memorandum is desired.

1x1 ID Photo
with
Name Tag

Republic of the Philippines
Department of Education
BUREAU OF EDUCATION ASSESSMENT
2nd Flr., Bonifacio Bldg., Meralco Ave., Pasig City 1600

ACCREDITATION AND EQUIVALENCY (A&E) TEST

Registration Form

Write Legibly. Put X on the applicable items.		Registration Date
Surname		Given Name
		M.I.

Birthdate			Learner Reference Number			Civil Status			Gender
Month	Day	Year				Single	Married	Separated	Male
			Home Address						Female

Region	Division	Learning Center
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ALS Program Completed (Pls. Specify)	A&E Test Applying for	Elementary Level
		Junior High School

To be accomplished by the Registration Officer

Proof of Identity	Name and Address of Testing Center
Contact Number	

I certify that I validated the information supplied by the applicant in this form based on the required attachments.

Registration Officer's Signature Over Printed Name

I certify that all information in this form are TRUE and CORRECT.

Applicant's Signature Over Printed Name

Required Attachments	<input type="checkbox"/> Proof of Identity	<input type="checkbox"/> Proof of Birth (NSO, Passport, Any legal Documents)
	<input type="checkbox"/> ALS Program Certification (if any)	

1x1 ID Photo
with
Name Tag

Republic of the Philippines
Department of Education
BUREAU OF EDUCATION ASSESSMENT
2nd Flr., Bonifacio Bldg., Meralco Ave., Pasig City 1600

ACCREDITATION AND EQUIVALENCY (A&E) TEST

Registration Form

Write Legibly. Put X on the applicable items.		Registration Date
Surname		Given Name
		M.I.

Birthdate			Learner Reference Number			Civil Status			Gender
Month	Day	Year				Single	Married	Separated	Male
			Home Address						Female

Region	Division	Learning Center
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ALS Program Completed (Pls. Specify)	A&E Test Applying for	Elementary Level
		Junior High School

To be accomplished by the Registration Officer

Proof of Identity	Name and Address of Testing Center
Contact Number	

I certify that I validated the information supplied by the applicant in this form based on the required attachments.

Registration Officer's Signature Over Printed Name

I certify that all information in this form are TRUE and CORRECT.

Applicant's Signature Over Printed Name

Required Attachments	<input type="checkbox"/> Proof of Identity	<input type="checkbox"/> Proof of Birth (NSO, Passport, Any legal Documents)
	<input type="checkbox"/> ALS Program Certification (if any)	

Enclosure No. 2



Republic of the Philippines
Department of Education
Division of _____
Region _____

CERTIFICATE OF ALS PROGRAM COMPLETION

This is to certify that _____ of _____
(Name) (Address)

_____ has satisfactorily completed _____
(Specify ALS Program Level Completed)

at _____ in _____
(Learning Center) (Address of Learning Center)

This certification is issued as one of the requirements for Accreditation and Equivalency (A&E) Test application.

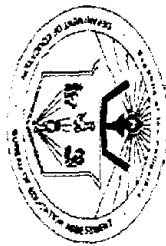
Signature over Printed Name
ALS Facilitator/Mobile Teacher



Republic of the Philippines
 Department of Education
 Region _____
 Division of _____

Accreditation and Equivalency (A&E) Test

List of Registrants



Testing Center: _____
 Region & Division Code: _____

Summary of Registrants M _____ F _____

Address: _____
 *A&E Test Level: _____
 Total: _____

No.	Name	Age	Birthdate	Sex	Documents Submitted <i>(Check the appropriate Column)</i>			Program ALS/ Non-ALS
					ALS Course Certificate	Proof of Identity	Proof of Birth	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								

*A&E Test Level: Elementary/Junior High School

Page _____ of _____

Registration Officer (Signature Over Printed Name)