



DEPARTMENT OF EDUCATION  
Region X- Northern Mindanao

**DIVISION OF MALAYBALAY CITY**

Corner Don Carlos and GuingonaSts., City of Malaybalay

Telefax #: 088-813-2894 or 221-4597, E-mail add: [dpdmlyblycity@yahoo.com](mailto:dpdmlyblycity@yahoo.com)

Website: <http://depedmalaybalay.page4.me>



April 28, 2014

**DIVISION MEMORANDUM**

No. 207 s. 2014

135  
DepEd-MALAYBALAY CITY DIVISION  
RELEASED

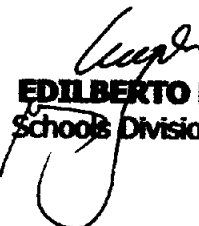
Date: 7/15/14 Time: 1:49PM  
By: Ababelle

**ANNOUNCEMENT FOR THE ADMINISTRATION OF THE PHILIPPINE SCIENCE HIGH SCHOOL-NATIONAL COMPETITIVE EXAMINATION (PSHS-NCE)**

TO:

Education Program Supervisors  
Public Schools District Supervisors  
Public and Private Elementary School Heads  
This Division

1. Per information from Virgilio M. Fuentes, Provincial Science and Technology Director of Musuan, Maramag, Bukidnon, the field is hereby informed of the **Philippine Science High School-National Competitive Examination (PSHS-NCE)** on October 4, 2014 for the selection and screening of scholars for SY 2015-2016. The deadline of the application will be on August 15, 2014.
2. For more information, please visit PSHS System website, [www.pshs.edu.ph](http://www.pshs.edu.ph) or contact Mrs. Rosie A. Salupado, Division Testing Coordinator.
3. Immediate dissemination of this information is enjoined.

  
**EDILBERTO L. OPLENARIA**  
Schools Division Superintendent

Enclosed:

(PSHS-NCE) Application Form

**2014 PHILIPPINE SCIENCE HIGH SCHOOL SYSTEM  
NATIONAL COMPETITIVE EXAMINATION (NCE)  
APPLICATION FORM**

THESE MATERIALS ARE NOT FOR SALE. THEY  
MAY BE PHOTOCOPIED AND MAY BE  
DOWNLOADED FROM [www.pshs.edu.ph](http://www.pshs.edu.ph)

**Instructions:**

Please accomplish this form in two copies. Type or print legibly all information needed. **DO NOT ABBREVIATE. DO NOT LEAVE ANY ITEM BLANK.** Countersign all erasures and corrections made.

**DEADLINE OF SUBMISSION: August 15, 2014**

Staple Only

1" x 1"  
Photo

**PERSONAL DATA:**

1) **NAME OF APPLICANT:** (Last Name, First Name, Middle Name)

2) **BIRTHDATE:**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
M	M	D	D	Y	Y	Y	Y

3) **AGE as of June 1, 2014:**

4) **SEX:**

 M  
 F

**MALE**  
**FEMALE**

5) **CONTACT NUMBERS:**

(pls. include all possible contact numbers)

6) **EMAIL ADDRESS:**

7) **COMPLETE HOME / PERMANENT ADDRESS:** (pls. include your zip code)

**CONSIDER THE FOLLOWING WHEN CHOOSING A CAMPUS:**

- The score in the NCE is the major basis for qualifying to the PSHS.
- All examinees are ranked from highest to lowest. The top 240 qualifiers irrespective of region of origin will be invited to enroll at the Main Campus but acceptance to the invitation is not compulsory.

**TO BE FILLED UP BY THE PARENTS:**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 1. Is your child a Filipino citizen?   | YES                      | NO                       |
| 2. Does your child have pending application as Immigrant in any foreign country?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Has your child taken the PSHS National Competitive Examination before?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. If not qualified in the Main Campus (MC), are you willing to enroll your child in a Regional Campus she/he will qualify in? (If you do not choose any regional campus, your child will be considered for ranking <b>ONLY in the MC.</b> )   | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. If YES in No. 4, check your choice of the regional campus where you want to enroll your child. (If you choose a regional campus, and your child does NOT qualify to the national 240 qualifiers, she/he will only be considered for ranking in the regional campus of your choice.) |                          |                          |

- |   |   |
|---|---|
| <input type="checkbox"/> <b>ILOCOS REGION</b> – San Ildefonso, Ilocos Sur     | <input type="checkbox"/> <b>CENTRAL MINDANAO</b> – Balo-i, Lanao del Norte    |
| <input type="checkbox"/> <b>CAGAYAN VALLEY</b> – Bayombong, Nueva Vizcaya     | <input type="checkbox"/> <b>SOUTHERN MINDANAO</b> – Tugbok, Davao City        |
| <input type="checkbox"/> <b>CENTRAL LUZON</b> – Clark Freeport Zone, Pampanga | <input type="checkbox"/> <b>CORDILLERA ADMIN. REGION</b> – Irian, Baguio City |
| <input type="checkbox"/> <b>CALABARZON</b> – Batangas City                    | <input type="checkbox"/> <b>SOCSESKSARGEN</b> – Paraiso, Koronadal City       |
| <input type="checkbox"/> <b>BICOL REGION</b> – Goa, Camarines Sur             | <input type="checkbox"/> <b>CARAGA</b> – Ampayon, Butuan City                 |
| <input type="checkbox"/> <b>WESTERN VISAYAS</b> – Jaro, Iloilo City           |   |
| <input type="checkbox"/> <b>CENTRAL VISAYAS</b> – Argao, Cebu                 |   |
| <input type="checkbox"/> <b>EASTERN VISAYAS</b> – Palo, Leyte                 |   |

I certify that the above information is true and correct.  
I understand that any false or misleading information will result to the disapproval of application/admission.

\_\_\_\_\_  
Parent's Signature over Printed Name

**TO BE FILLED UP BY THE SCHOOL AUTHORITY CONCERNED:**

1) **NAME OF SCHOOL** (Write name of school in full):

2) **COMPLETE SCHOOL ADDRESS:**

3) **SCHOOL TYPE:**

 Public  
 Private

4) **GRADE LEVEL as of JUNE 2014:**

5) **SCHOOL CONTACT NOS.:**

6) **Pupil's GENERAL AVERAGE GRADE (SY 2013-2014):**

7) **Pupil's RANK in the Batch (SY 2013-2014):**

8) **Number of Pupils in the Batch (SY 2013-2014):**

- I hereby certify that the pupil-applicant is currently enrolled in his/her 6<sup>th</sup> year of basic elementary education (exclusive of kindergarten & preparatory school) for SY 2014-2015.
- I also certify that the pupil-applicant (Please check the appropriate box)
  - belongs to the upper 10% of the batch (SY 2013-2014) and does not have a grade below 80.
  - does not belong to the upper 10% of the batch (SY 2013-2014), but has a minimum final grade of 85 or higher in Science and Math, and a minimum final grade of 80 in all other subjects.

I hereby certify that the pupil-applicant is of good conduct and behavior.

\_\_\_\_\_  
Principal/School Head/Registrar's Signature over Printed Name

\_\_\_\_\_  
Guidance Counselor/Adviser's Signature over Printed Name

(PLEASE DO NOT DETACH)

This serves as a proof of application. **IMPORTANT: This DOES NOT serve as the test permit.**

Submit the following upon filing of application:

- Fully accomplished Application Form in two (2) copies
- Two (2) identical recent 1 x 1 ID pictures
- Non-refundable test fee - P 100 for private school students/Free for public school students
- Copy of report card (SY 2013-2014)

**Recommendation of the PSHS Registrar/DOST or PSTO Coordinator:**

As per data above:

Approved:  [ ]  
Disapproved:  [ ]

Reason/s for Disapproval: \_\_\_\_\_

Processed by:  DOST \_\_\_\_\_  
 PSHS \_\_\_\_\_

Date: \_\_\_\_\_

**For use of the PSHS Cashier's Office:**

Mode of Payment:  Cash  
 Money Order

No. of Applicants: \_\_\_\_\_ (for group filing)

Amount Paid: \_\_\_\_\_

No. of stamps issued: \_\_\_\_\_

Series Number: \_\_\_\_\_

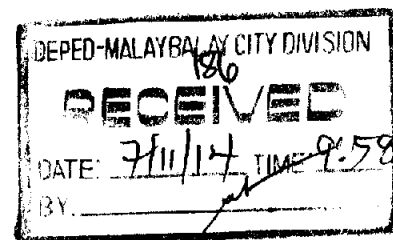
Payment Received by: \_\_\_\_\_

Date: \_\_\_\_\_

**REMINDERS TO THE EXAMINEE:**

- Be at your testing center on **October 4, 2014** one (1) hour before your scheduled examination (either a.m. or p.m. as indicated in the exam permit).
- Present the **Examination Permit** and your **school I.D.** to the Proctor/ Room Examiner.
- Bring at least **two sharpened #2 pencil**, a **good eraser** and **snacks**.

July 10, 2014



**EDILBERTO L. OPLENARIA**  
*Schools Division Superintendent*  
Department of Education-Division of Malaybalay

Sir:

Greetings!

We are pleased to inform you about the forthcoming administration of the **Philippine Science High School-National Competitive Examination (PSHS-NCE)** on October 4, 2014 for the selection and screening of scholars for SY 2015-2016.

In this regard, we would like to request your assistance in the dissemination about the PSHS-NCE to all the prospective examinees in your district. Please find enclosed copies of materials related to the implementation of the above mentioned activity. Should there be question regarding this matter, please contact us through number: 09176773332 or email address: pstcbuk@gmail.com. The information is also available at the PSHS System website, [www.pshs.edu.ph](http://www.pshs.edu.ph). Deadline of the application form will be on August 15, 2014.

Thank you very much.

Very truly yours,

**VIRGILIO M. FUERTES**  
Provincial S&T Director